### **Advances in Medical Education**

Volume 4

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# Professional Responsibility

The Fundamental Issue in Education and Health Care Reform



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# Chapter 6 Professional Responsibility in an Age of Experts and Large Organizations

Steven Brint

The Anglo-American professions originated as occupations that dealt with very sensitive and high-stakes matters: life and death in the case of the medical profession; the circumstances of one's liberty and fortune in the case of the legal profession; the salvation of the soul in the case of the ministry. In matters of such ontological significance, trust was naturally an important part of the relationship between professional and client. The truly high status professions of medicine and law were based on the economic relationship of fee-for-service. Of course, they required higher education, but, unlike today, higher education was intended for elites and practice in a profession was for the most part limited to the sons of the gentry and merchant classes. The idea of professions as built on a special relationship of trust between practitioners and clients grew out of this matrix of social status-based recruitment and fee-for-service practice (Elliot 1972, Introduction; Larson 1979: chap. 2; Reader 1966). The professional man was not only someone who had studied and practiced in a field that required a certain depth of specialized knowledge; he was, ideally, also an adviser and counselor and a person who could be depended upon to defend one's interests vigorously based on a personal commitment cemented, but cemented only, by a fee. Many professionals of the era did not fit the ideal-typical economic and social circumstances of the "trust" professions, but that did not matter. The notion of professional practice was narrower than it is today, and salaried men were not often accepted as "true" professionals (see Larson 1979: chap. 2).

The rise of large organizations in the nineteenth century created demand for cadres of new types of salaried experts – engineers, accountants, urban planners, social workers, and many others (see, e.g., Bledstein 1976; Wiebe 1967). Intellectuals like R.H. Tawney attempted to generalize the trust relationship to these new salaried

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professions by emphasizing the responsibilities of professionals as guardians of social values, or what I have termed "social trustees" (Brint 1994: chap. 1). Let me quote him here:

[Professionals] may, as in the case of the successful doctor, grow rich; but the meaning of their profession, both for themselves and for the public, is not they they make money, but that they make health, or safety, or knowledge, or good government, or good law... [Professions uphold] as the criterion of success the end for which the profession, whatever it may be, is carried on, and [subordinate] the inclination, appetites, and ambition of individuals to the rules of an organization which has as its object to promote the performance of function (Tawney 1948, pp. 94-95).

These functions, for Tawney as for many others who sought special social status for the professions, were activities that embodied and expressed the idea of larger social purposes. This connection between advanced education and service to society elevated the social importance of the new salaried professionals, while providing them with an ideology around which to organize as a distinct, morally elevated stratum in society. Unlike business people, they were not simply interested in selling their services for a profit. They had larger civic and social responsibilities. The non-capitalist, even anti-capitalist elements in this ideology are worth emphasizing. As I wrote in In an Age of Experts (1994) in this respect, the idea of professions, so intertwined with the development of modern capitalism and the modern welfare state, nevertheless showed a remarkable resonance with much older pre-capitalist cultural and political formations: not only elevated social purposes, but the idea of work in a calling, collective self-governance, and high levels of self-direction in day-to-day activities.1

In its inclusiveness, the ideology of social trustee professionalism served many important functions for members of occupations that required higher-level degrees and aspired to a distinctive status in society. Occupations like school teaching and social work with dubious technical knowledge bases could nevertheless claim a kind of moral superiority, and they could at least look forward to further technical advancements as an important aspiration for the future. Occupations like engineering with their secure technical bases often found it convenient to identify themselves as serving larger social purposes.

The same sentiments expressed by Tawney, but framed in occupation-specific terms, were the conventional wisdom of the leaders of professional associations during the nineteenth and early twentieth centuries. We can begin to show this by examining the speeches of leaders of professional associations and the colleges and universities that produced professional men and women. Charles S. Levy and I studied the speeches of leaders of ten professional associations during the period 1875-1995. We also coded

the inaugural speeches of presidents of four prominent colleges and universities.2 In each speech we coded the incidence of more than a dozen types of expressed concerns and commitments. These data showed that references to the civilizational purposes of professions were the most common rallying point of leaders of professional associations in the years prior to the Great Depression and much more common than references to civic life, community life or social reform. They were also much more common than references to the technical achievements or internal affairs of the professions (Brint and Levy 1999).

What did professional elites mean by serving civilization? This varied from profession to profession, but, in broad outline, the ideals followed the frame of social responsibility described by Tawney. College and university presidents emphasized the importance of the diffusion of knowledge, the creation and perfection of a "higher vision" of life, and the cultivation of desirable qualities of mind. Leaders of the bar emphasized the ideals of justice, the protection of individual freedoms, and the improvement of human abilities to meet social needs in an orderly and nonviolent fashion. James O. Broadhead, the first president of the American Bar Association, for example, evoked a common theme of lawyers and judges as the "wise guides" of society: "It is the business of those who have studied [the law]...to see that public sentiment springs from a pure fountain and flows in an unobstructed channel, and [that] pursuance of its mandates shall secure to each citizen the fullness of individual existence and impose so much restraint on each as is necessary for the good of all" (Broadhead 1879, 70). Presidents of the American Institute of Architects evoked the spiritual and social benefits of beauty in built environments. Although references to the civilizational purposes of medicine were less common, when they were made by leaders of the AMA they focused on the application of scientific intelligence to the humane project of curing disease. So, for example, the 1945 speaker of the AMA's House of Delegates, Dr. H.H. Shoulders challenged his colleagues: "Let us again concern ourselves with advancing the science of medicine, with meeting the standards of medical education and with delivering a higher quality of medical service, ever mindful that science without a soul may be cruel and inhumane, where science possessed of a soul is the very highest achievement, the apotheosis of humanity" (Shoulders, quoted in Fishbein 1947, 483).

Civilizational themes were, however, never dominant in the science-based professional associations: the American Chemical Society and the American Society of Mechanical Engineers. Instead they focused on the technical achievements of their

<sup>&</sup>lt;sup>1</sup>The origins of the sense of professionals as serving particularly elevated social purposes and the latent or explicit anti-capitalism of professional ideology differs somewhat in continental Europe with the higher status of the civil service there and the connection between professionals and labor unions in the building of social democratic movements in countries like Sweden.

<sup>&</sup>lt;sup>2</sup>The professional associations included the American Bar Association, the American Chemical Society, the American Institute of Architects, the American Medical Association, the American Society of Mechanical Engineers, and the National Education Association. Among the more or less strictly academic professional associations, we coded speeches of presidents of the American Historical Association, the American Political Science Association, and the Modern Language Association. The colleges and universities were the University of California, Berkeley, the University of Chicago, the University of Pennsylvania, and Pomona College

fields.<sup>3</sup> During the early years the presidents of the American Psychological Association worked hard to establish the scientific *bona fides* of the new discipline, also focusing on technical achievements. Unlike in the other associations we studied, sociocultural themes grew in importance in the APA during the two later periods and discussions of the technical achievements of the discipline receded.

#### The Rise of "Expert Professionalism"

The years 1880-1930 were the heyday of social trustee professionalism, and by the 1960s this ideology was in decline. A big part of the difficulty professional elites found in sustaining it was that some of the most important and fastest-growing professions - including engineers, accountants, and management consultants - saw nothing particularly wrong with the pecuniary purposes and the utilitarian practices of business enterprises, and they did not feel the need for an ideology that helped to differentiate high-minded professionals from low-minded business people. This was evident in the speeches of leaders of scientific associations from the beginning of the period studied. A second difficulty is that the era of occupational selfregulation waned. The state and corporations took a larger and larger role in the regulation of the professions, often taking up the cause of consumers and criticizing the tendencies of professionals to feather their own nests. Thus, for example, health maintenance organizations developed in large part to control the exorbitant treatment costs of fee-for-service doctors (Starr 1982; Freidson 1993). This latter development was a particularly hard blow for the ideology of social trustee professionalism because now it was the state and other efficiency conscious organizations that appeared to be serving the interests of clients against the pecuniary interests of professionals. A third obstacle was that professional associations became large bureaucratic entities in their own right, and internal organizational life became a focus for leaders of the professional association rather than the larger purposes the professions served. By the last period Levy and I studied (1970-1995) sociocultural references constituted only about one-quarter of the themes in presidential speeches. Issues related to membership concerns and internal activities, such as task forces and committee recommendations, assumed a correspondingly larger share of attention. ABA President James D. Fellers used his speech in the mid-1970s, for example, to describe the formation of 15 commissions and projects to examine controversies in such areas as information technology and the law, accounting practices, media law, and medical malpractice (Fellers 1975).

I have argued that a narrower ideology of "expert professionalism" – the focus on the value of specialized skills requiring higher education – filled the ideological space conceded by the dwindling number of advocates of social trustee profession-

alism (Brint 1994: chaps. 1–2). The archetypal "expert professional" saw him or herself as having acquired specialized skills through advanced training in a formal body of knowledge and working in areas requiring not only skill but judgment. The outlook was more technocratic than service-oriented. Expertise is used to aid organizational (and personal) advancement rather than any "aims" society might have for professional service. Formal rationality and utilitarianism were intrinsic to expert professionalism just as substantive rationality and service ideals were intrinsic to social trustee professionalism. The outlook of expert professionalism is captured well in David Halberstam's portrait of an archetypal figure of mid-twentieth century America, Robert McNamara, chief executive of the Ford Motor Company and later Secretary of Defense under Presidents Kennedy and Johnson. Halberstam wrote of McNamara;

(McNamara) symbolized a new kind of executive in American business... (men) who were modern, well educated, technicians who prided themselves that they were not tied to the past but brought the most progressive analytical devices to modern business, who used computers to understand the customers and statistics to break down costs and productions. At Ford what distinguished McNamara was the capacity to bring a detailed financial system to (repair) the almost total disorganization of the company. He was brilliant at systematizing, telling Ford where it was going before it got there (Halberstam 1969, pp. 231–232).

Although he quickly rose to the rank of star executive, McNamara had formerly been a teacher at the Harvard Business School, one of the many places that brought efficiency-mindedness and problem-solving expertise into trained alignment. He symbolized the mind-set of the engineer in the service of organizational objectives that I see at the heart of expert professionalism. A representative paean to expert professionalism can be found in Daniel Bell's *The Coming of Post-Industrial Society* (1973), here in a section on the significance of new intellectual technologies for solving social problems:

An intellectual technology is the substitution of algorithms...for intuitive judgments. These algorithms may be embodied in an automatic machine or a computer program or a set of instructions based on some statistical or mathematical formula; the statistical and logical techniques that are used in dealing with 'organized complexity' are efforts to formalize a set of decision rules...The chain of multiple calculations that can be readily made, the multivariate analyses that keep track of the detailed interactions of many variables, the simultaneous solution of several hundred equations — these feats which are the foundation of comprehensive numeracy — are possible only with (the primary) tool of intellectual technology, the computer (pp. 29–30).

Whether or not one agrees that "expert professionalism" describes the dominant professional ideology from the mid-twentieth century to today, it seems clear that, structurally, about all that remains in common across the professions is that: (1) they bring (some degree of) specialized skill and a (some level of a) formalized knowledge base into the labor market, (2) they have high levels of education and therefore higher than average standing in society, and (3) they do not have line authority in the management of organizations. The ideology of social trustee professionalism per-

<sup>&</sup>lt;sup>3</sup>Several presidents of ASME in the years between 1930 and 1970 did become interested in the intersection of technology and social life, leading to a temporary surge in themes concerning the civilizational and civic values of engineering.

<sup>&</sup>lt;sup>4</sup>Because they frequently interact and inter-marry, college graduate professionals and managers are probably better thought of as members of a common social class, in Max Weber's sense of the

sists in many of the human services professions – in occupations like school teaching, public law, and parts of general care medicine – but it is rather uncommon in the professions whose work is primarily quantitative in nature, conducted in forprofit corporations, and well remunerated. The more specific concern for serving the underserved has become connected with bids for symbolic status (and additional resources) by members of a subordinate fraction of the professional-managerial stratum, typically those working in government and non-profit social welfare agencies and among those who are sensitive, for whatever reasons, to the injustices caused by poverty and disadvantage.

#### A Revival of Social Trustee Professionalism?

The social philosopher William M. Sullivan is perhaps the most prominent modern advocate for a revival of professional responsibility along the lines suggested by early twentieth century progressives. Sullivan's proposal focuses on creating a new generation of professionals who embrace a stronger sense of social purpose. They derive this orientation from educational training that includes a strong social and ethical component. Part of the reawakening Sullivan advocates requires a proper appreciation of the professional-client relationship. He defines this as "the stance of intelligent responsiveness on the part of individuals to expectations of their social relationships." I agree that shoring up what Sullivan calls the "third apprenticeship" - the apprenticeship into the values and social responsibilities of the profession - can be a helpful way to revive professionals' interests in their civilizational responsibilities, at least in limited ways. Others represented in this volume argue that the development of a sense of responsibility for reducing inequality and serving the underserved would be an appropriate and broadly appealing functional equivalent to the social trustee professionalism that united much of the professional stratum during and immediately after the Progressive Era.

For reasons that I will discuss in the remainder of this chapter I do not think that a coherent and broadly inclusive ideology of professional responsibility can be reconstructed in the twenty-first century. Any effort to do so would require realism about four decentering elements in the circumstances of professional life: (1) the limited appeal of contemporary versions of progressive idealism; (2) the continuing prominence of occupational skill and expertise in the definition of the professional stratum; (3) the decisive role of formal organizations in shaping and allocating professional responsibilities; and (4) the contested and unsettled nature of professional responsibilities in practice. I do not think that the issue of professional responsibility is unimportant or beyond discussion. Instead, I will argue that identifying its influence properly will require piecing together the net result of multiple strands of supportive ideology and supportive organizational arrangements, rather than focusing on the development of a single broadly appealing framework.

## The Limited Appeal of Progressive Idealism

Let me examine first the limited appeal of contemporary versions of progressive idealism. We can gain a sense of the size of the group to which politically liberal ideals about professional responsibility might appeal by looking at the professionally dominated industries and then picking out those in which progressive ideals are most likely to resonate. An industry-based analysis is preferable, in my view, to an individual-level analysis because concentrations of sentiment are more important for effective political action than the sheer distribution of sentiments, and concentrations are better examined at the industry level.

To define the industries of interest, I will use a simple criterion: professionally dominated industries are those in which at least 5 % of employees hold graduate or professional degrees. Graduate degrees are concentrated in fewer than 70 of the many hundreds of industries the government identifies in its standard industrial classification. When I began to track these industries in the late 1990s, the list that resulted from using the 5 % criterion included all industries that previous writers had identified as falling within the sphere of the "knowledge-based" or "post-industrial" economy.<sup>5</sup>

Table 6.1 displays the list of "knowledge economy" industries from the 1990–2010, together with the proportion of employees with graduate degrees in these industries, according to an analysis of the General Social Survey (GSS). To qualify an industry must have had at least 25 respondents to the GSS during the period. This limits representation in the "knowledge sector" due to statistical fluctuation. The actual proportions will obviously vary by a margin of error which itself varies by the size of the industry population in the GSS. Here I include only the industries that remained on the list from the last quarter of the twentieth century through 2010 (see Brint 2001). The knowledge sector, defined in this way, includes agricultural services, mass media industries, chemicals, plastics, pharmaceuticals, computers and electronic equipment, scientific instruments, banking, accounting, consulting and other business services, medical services and hospitals, educational services (obviously including colleges and universities), legal services, and nearly all of government.

<sup>&</sup>lt;sup>5</sup>My approach was strictly empirical and consequently refused to take sides between the contending visions of post-industrial society – between Daniel Bell's (1973) emphasis on high-tech industries and "quality-of-life" services, Thomas M. Stanback's (1981) rise of business services, or Richard Florida's (2002) urban future of science-based industries joined to civic planning and the arts.

<sup>&</sup>lt;sup>6</sup>Thanks to credential inflation, a few new industries joined the list for the first time in the 2000s, including some, like jewelry and sporting goods, no theorist of post-industrial society would wish to include in the "knowledge economy."

<sup>&</sup>lt;sup>7</sup>I conducted a separate analysis to determine how much the knowledge sector was contributing to the gross domestic product over time. I found that the knowledge sector accounted for approximately 37 % of GDP in the last quarter of the twentieth century (Brint 2001), growing from just over one-quarter in 1959 to nearly two-fifths in 1997. With the help of graduate student Jacob Apkarian, I recently updated these estimates. Knowledge sector industries continued to be among the most dynamic in the economy in the early 2000s. Taken collectively, they still did not constitute the majority contribution to gross product, but by 2010, they were getting closs.

Table 6.1 U.S. "knowledge economy" industries, late twentieth and early twenty-first century

	1990–2010 cumulative percent w/graduate degree	1990–2010 A	
Offices of health practitioners, not elsewhere classified (n.e.c.)	0.500	42	
Colleges and universities	0.398	723	
Legal services	0.350	297	
Non-commercial educational and scientific research	0.311	61	
Elementary and secondary schools	0.299	1,904	
Commercial research, development, and testing labs	0.288	52	
Museums, art galleries and zoos	0.235	34	
Educational services, n.e.c.	0.230	74	
Engineering, architectural, and surveying services	0.227	203	
Miscellaneous professional and related services	0.221	95	
Social services, n.e.c.	0.216	310	
Offices of physicians	0.204	260	
Religious organizations	0.202	183	
Business management and consulting services	0.185	184	
Computer and data processing services	0.183	268	
Security, commodity brokerage, and investment companies	0.176	170	
Pharmaceuticals	0.165	91	
Libraries	0.153	59	
Offices of dentists	0.151	126	
Electronic computing equipment	0.149	. 141	
Guided missiles, space vehicles, and parts	0.140	57	
Administration of human resources programs	0.135	163	
Agricultural services, except horticultural	0.126	87	
General government, n.e.c.	0.124	347	
Telegraph and miscellaneous communication service	0.122	82	
Administration of economic programs	0.120	117	
Scientific and controlling instruments	0.115	26	
National security and international affairs	0.111	468	
Administration of environmental quality and household programs	0.110	100	
Radio and television broadcasting	0.108	74	
Health services, n.e.c.	0.105	455	
Job training and vocational rehabilitation services	0.103	29	
Accounting, auditing, and bookkeeping services	0.101	138	
Residential care facilities, without nursing	0.099	91	
Electrical machinery, equipment, and supplies	0.098	51	
Hospitals	0.095	1,226	
Photographic equipment and supplies	0.094	32	
Business, trade, and vocational schools	0.091	33	
Membership organizations	0.088	102	

Table 6.1 (continued)

	1990-2010 cumulative percent	
Petroleum products	w/graduate degree	1990-2010 A
Public finance, taxation, and monetary policy	0.087	46
Justice, public order, and safety	0.086	81 519
Theaters and motion pictures		
Banking	0.077	155
Petroleum and coal products	0.077	470
Optical and health services supplies	0.073	124
Aircraft and parts	0.072	83
Printing publishing at the	0.072	125
Printing, publishing, and allied industries, except newspapers	0.066	272
Advertising		212
Book and stationery stores	0.064	78
Real estate including real	0.064	47
Real estate, including real estate-insurance-law offices  Newspaper publishing and printing	0.063	509
Insurance	0.060	116
	0.060	
Air transportation	0.058	452
Credit agencies, n.e.c.	0.058	155
Total	10.000	156
ource: Cumulative General Social Survey 1990, 2010		13,019

Source: Cumulative General Social Survey, 1990-2010

Bold = Industries in which employees were significantly more liberal than the adult population

Italicized Bold = Industries in which employees were more liberal than the adult population during the period, but not by a statistically significant margin

Politically liberal knowledge-economy industries are those showing a statistically significant difference in mean scores on a seven-point liberal-conservative scale between members of the industry and the American adult population. This seven-point scale is an imperfect but widely used measure that is fortunately highly correlated with more specific topic-based measures of political liberalism (see Gross 2013: chaps. 3-4). In Table 6.1 I have bolded the industries in which liberal political views tended to prevail. The level of liberalism in these industries was significantly higher than that found in the American population as a whole during the period studied, 1990-2010.8 I have italicized those industries in which political views were more liberal than the mean but differences in means do not reach statistical significance at p < .05. These are industries in which future change could lead to stronger identifications with liberal political views.

<sup>&</sup>lt;sup>8</sup>I would like to thank Jacob Apkarian for running these analyses of the --1:2.

The politically liberal industries in the "knowledge economy" include significant parts of government, human services, higher education, health services, and media. They do not, however, include elementary and secondary schools, offices of physicians, any of the business services industries, or government executive or security agencies. If we include only the bolded industries, those in which differences in political outlook were statistically significant from the American population at large, the politically liberal industries include only a minority of industries (14 of 57) and only a relatively small proportion of employees in the knowledge-economy sector (21 %). If we include the italicized near-liberal industries together with the bolded, clearly liberal industries, slightly more than half of the "knowledge economy" industries listed (28 of 57), but still fewer than half (43 %) of the total number of employees are in the liberal camp.

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We cannot expect professionals in most of the industries listed above to embrace ideas about reducing inequality and serving the underserved. Professionals in general tend to be more liberal than business people on social issues, such as the role of religion in public life and the extension of opportunities for minorities and women. But when questions engage issues of economic distribution, equality of results, and taxation, most professionals shift back toward the more conservative positions typical of business people (see Brint 1994: chap. 5; Brooks and Manza 1999).

#### The Morality of Expertise

Although the two are often counterposed, it is unclear to me that expert professionalism necessarily implies a lower level of social responsibility than more explicitly value-based ideologies. An important caveat is that for skill and expertise to register an autonomous moral impact they must be rooted in the relevant occupational community, rather than embedded in the regulatory apparatus of the state or the market. Expert professionalism carries with it the spirit of a distinctive form of social responsibility and one that can be at least as potent as the high-minded, but vague idealism of a Tawney. Professional craft skill is training to make an improvement in the circumstances of clients. For the teacher it is an improvement in students' knowledge and motivation to learn. For the physician it is the treatment of a patient's ailment and motivation to maintain a healthy lifestyle. These craft skills are rooted in social relationships: teacher-student and doctor-patient. These relationships foster interpersonal responsibility and, cumulatively, also an incremental contribution to a broader social responsibility.

We can subject this idea to thought experiments that bring the point home. Imagine a doctor who fully commits, as a normative ideal, to the improvement of the health of the patients she encounters - or even, as Tawney proposed, to the health of the larger society. Let us say she feels responsible for enacting this normative ideal in all of her encounters with patients and other citizens. But let us also say that this physician is poorly trained and cannot diagnose or prescribe properly. From the perspective of interpersonal and social responsibility, how unimportant is the craft

aspect of professional knowledge as compared to the socially normative elements of Tawney's ideal? The opposite circumstance is equally illuminating: In what esteem should we hold the physician who is an exceptional diagnostician and communicates exceptionally well with patients, but has no sense of professional responsibility beyond the perfection of craft in patient care? Who can say that this physician lacks effective social responsibility? In teaching, we have the analogous examples of the high-minded idealist whose students learn little because he has not mastered the techniques of effective instruction, motivation, and assessment as compared to the master teacher whose sense of social responsibility extends no further than the evidence of learning and the motivation that he produces in his students.

Craft skill and social idealism are not mutually exclusive, of course, and the sense of social responsibility commended by Tawney can certainly elevate professional life. But the combination is rare, and the rhetoric of elevated morality is a poor substitute for the solidity of craft, if the latter is missing. If forced to choose one, which should we choose, given that the issue of responsibility is addressed, albeit in markedly different ways, by both? In Table 6.2 below, I provide an answer: The common factors among those who deserve our esteem, those on the left side of the diagram, are effective craft skills.

In any efforts at ideological reunification of the professional stratum, respect for technical and interpersonal skill in the provision of services will be essential for segments of the professional stratum that are closer to engineering than human services. The human services too have much to gain from a heightened respect for technical skill. In parts of Asia where students perform better than they currently do in the United States, the school teacher is thought of more as a virtuoso performer than as an empathic care-giver (Brint 2006). Of course, nothing is wrong with empathy as long as it is accompanied by techniques that lead to results. It follows that excellent training will be essential to all segments of the professional stratum so that craft skills can be realized consistently in practice.

Table 6.2 Distribution of professionals in relation to two forms of distinction

		Level of craft skills/expertise		
		High	Low	
Moral aspiratio to serve clients and/or society	High	Skilled, socially idealistic practitioner	I I Unskilled, socially I idealistic I practitioner	
	Low	Skilled, socially disengaged practitioner	I I Unskilled, socially I disengaged I practitioner	

#### The "Collective Organizational Worker"

The management scholar Paul Adler and his colleagues have argued that few professionals were ever solely responsible for the well-being of their clients or patients. Most always worked in teams. This situation is certainly the norm today. Few patients, and none with serious medical issues, are treated solely by a single M.D. A whole professional team — each with trained expertise — is involved. In surgical cases, this team would include nurses, general practitioners, medical specialists, anesthesiologists, surgeons, and physical therapists. One doctor may be primarily responsible, but the treatment cannot be a success without the joint labor of many professionals. For this reason, Adler and his colleagues focus not on the individual professional but on what those in the Marxist tradition would call the "collective worker," — that is, the ensemble of professionals who are jointly responsible for treating patients, educating students, and managing the needs of business clients (see also Adler et al. 2008; Heckscher and Adler 2006).

In tandem with Adler's conception of the "collective professional worker," I would suggest the need for a complementary conception of the "collective organizational worker." Without the "collective organizational worker" neither the public's nor the government's expanding expectations of professionals' responsibilities could be met. To understand professional responsibility it is therefore necessary to examine organizational life and to analyze the differing expectations interest groups have of large and prominent organizations as compared to small and little-known organizations.

The smaller the organization, the less developed the relationships with the outside world and the fewer the expectations of clients and others who have an interest in the performance of the organization. At one end of the spectrum are legal and certified public accounting firms run by a small number of partners or even a solo practitioner. These firms can practice with little reference to expectations beyond serving the needs of clients and, when times are bad, the firm's need to recruit new clients. Even these firms must typically employ an office manager to bill clients and to monitor the firm's compliance with state and professional regulations. Clients and other stakeholders make more numerous and more complex claims on larger and more prominent organizations. Consequently, the capacity of individual professionals to engage with the responsibilities society places on them declines with every increase in the size and prominence of the organizations that employ them.

Let me illustrate with an example drawn from an organization with which most readers will be familiar: research universities. The leading professionals in these organizations are the members of the faculty. The institution identifies the main facets of their professional responsibility: research, teaching, and service. During review cycles both campus colleagues and university administrators determine whether faculty members have achieved an acceptable level of accomplishment in each area. Those who are truly excellent in all three areas of evaluation are models, but their level is not reached by many.

The challenge of achieving recognition even in one's own narrow specialization area precludes attention to many facets of the professional role that could in theory be considered matters of professional responsibility. Where gaps develop, the university deploys specialized offices to handle this expanded set of professional responsibilities that professors are no longer able to address. A few examples: Advising students can be considered a sphere of professional responsibility related to teaching. Research university professors continue to advise graduate students, but they are only rarely involved in advising undergraduates. Instead, an entirely separate staff of professional advisers grows up to fill this all-but-abandoned responsibility. Similarly, professors may be conscious of the desirability of inclusiveness so that students from all backgrounds will feel comfortable in class and on campus, but most are not professional experts on inclusiveness and they have limited time to monitor the extent to which inclusiveness is being achieved. Universities consequently create offices of equity and diversity to monitor campus climate. Similarly, excellent teaching requires knowledge of developing capacities of instructional technology. Some professors keep up to date with these developments, but most do not have the time to do so because they are spending most of the time they have writing papers and keeping up with developments in their own scholarly and scientific fields. Again the solution is organizational: an office of instructional technology, often complete with course designers, is put under the management of experts in information technology.

These are a few illustrations of a manifold reality. To sketch the circumference of this reality, I will provide an (incomplete) catalog of university offices that have become common surrogates for professionals in what can be considered primary areas of professional responsibility. In the domain of research, these offices include federal and foundation relations; research ethics and protection of human subjects boards; grants administration; environmental, health and safety; capital planning and construction; purchasing; economic development; and technology park administration. In the domain of teaching, these offices include instructional technology; undergraduate and graduate advising; academic support services; prestigious scholarships and awards; assessment; new faculty preparation and mentoring; equity, diversity, and inclusion; off-campus study opportunities; and career counseling. In the domain of service, these offices include community relations; government relations; strategic communications; K-12 outreach; educational resources management; campus tours; athletic administration; website managers; and conveners of citizens-university committees. Selected faculty members are recruited to serve on advisory committees for these offices, but the primary "professional responsibility" lies with the division of functional offices to represent not the professional body but the university.

The university's responsibility exceeds professorial responsibility because the costs of ignoring vital relationships are too great; the expectations of students and communities for services have expanded; and, perhaps most important of all, because regulatory requirements have greatly increased (Ehrenberg 2012). Coming

<sup>&</sup>lt;sup>9</sup>New regulatory frameworks are building in interesting ways on the team model. In experimental sites doctors are no longer being reimbursed individually for the treatments they prescribe, but rather teams are reimbursed and deductions are made when avoidable faults are found in treatment. This puts a premium not only on collective responsibility, but on careful uses of checklists to manage patient care.

into conflict with these rising expectations are the fixed number of hours in the day and, in many institutions, the increased expectations professors face for achievement in the three major areas of merit evaluation. When evaluation expectations are high and time is scarce, professors are happy to consign components of an expanding environment of "professional responsibility" to organizational surrogates.

What I have said about universities is also true of other organizations in which professional judgment is central. Doctors, for example, are typically too busy working in patient care (and, in some cases, also research) to manage many new areas of professional responsibility. They do not, for example, know enough about Medicare reimbursement to advise patients about it. They have not studied enough of the literature to develop protocols for maintaining antiseptic conditions. Some are qualified only to talk about treatment of disease and not about the maintenance of healthy lifestyles. Most are not experts in insurance and therefore cannot advise patients well on what is and is not covered by insurance. They are not all experts in communication and therefore cannot always explain to patients what is required for improvement in a way that patients can understand. In a health maintenance organization, these tasks (or backup for these tasks) are assigned to offices staffed by trained surrogates.

Some responsibility functions performed by organizational surrogates may over time migrate into ordinary professional practice. This seems to be happening (slowly) in universities in the area of utilization of instructional technologies. It also seems to be happening in HMOs in the area of maintaining healthy lifestyles. Values and practices that are central to the technical core of professional occupations are likely candidates to become embedded in practice, while values and practices that are important to stakeholders but peripheral to the technical core of professional work are likely candidates for continuing to be under the jurisdiction of organizational surrogates. However, in the world of professionals change is often slow and it may take a new generation to inhabit expanded expectations even in areas that align with traditional core activities.

#### The Contestation of Purposes

When we talk about professional responsibility, we need to ask more specifically "responsibility for what?" and "responsibility to whom?" Tawney's abstractions (health, safety, knowledge, good government, good law) are too vague to be particularly meaningful today. Physicians were once charged with treating diseases and debilitating physical conditions. In addition to treatment physicians are now charged with helping patients maintain a healthy lifestyle through exercise, diet, avoidance of dangerous substances, and listening to their bodies. Our conception of what health signifies has changed due to this struggle of ideals. Similarly, teachers were once charged with providing subject matter knowledge

and basic cognitive skills to their students. Later the capacity to motivate students to learn became an important element in the expectations we have for teaching practitioners. With this new emphasis on motivation came a wider portfolio of learning activities, projects, field trips, lab experiments and other forms of learning by doing. Today, some influential educators have advocated the importance of teaching what used to be called character and have charged teachers to be responsible for helping students to develop resilience, conscientiousness, and other non-cognitive skills (see, e.g., Tough 2012). They have done so because they think these qualities are as important, or more important to the success of students, than cognitive skills alone.

It is important to note that these ideational struggles are not often led by professionals. In fact, it may be that professional associations are one of the last places to look for changes in the ideals of practice. If we believe the social historian Paul Starr (1982), the shift from disease prevention to health maintenance seems to have been driven in part by insurance companies, as well as by physical fitness enthusiasts. The role of the AMA, in the early days, is unclear. The new concern for teaching non-cognitive skills in K-12 education is the result of a coalition of renegade economists like James Heckman, education journalists, and some outlying education reformers. The AFT and the NEA have had little to do with it.

If "responsibility for what?" is an important question, so too is "responsibility for whom?" Treatment of some diseases (such as AIDS) were initially resisted or overlooked by the medical community, because they were associated with stigmatized populations. It took activists to reset the agenda (Epstein 1996). Many other health initiatives have been led by state actors and insurance companies, rather than professionals. My reading of the history of efforts to bring a greater sense of social justice into the educational and medical fields suggests that activists and EEOC lawyers had much more to do with this in the beginning than the professional associations (or the universities) (Lehman 1995). The goals of greater equity in the provision of medical and educational services may be relatively well accepted now, but it took activists' sense of social justice and government's willingness to frame and enforce new policies to bring those ideals to the forefront. Many of the authors in this volume assume that the next frontier of professional morality will be greater emphasis on the needs of underserved communities, but historically professional communities have shown themselves to be interested more often in technical skill building and civilizational horizons than in underserviced groups. The latter will find allies in the professional ranks but their natural advocates are social justice activists, liberal parties, and government enforcement agencies.

We live in a world in which the work of professionals is prescribed by what publics are willing to pay for; what intellectuals, activists and policy entrepreneurs convince them they should pay for; and by the regulations governments insist on. These interchanges provide fertile ground for a political sociology of professional responsibility — one that has not yet been written.

#### The Professional and the Organization

I do not take these points as rendering the values and moral actions of individual practitioners unimportant or beyond discussion. Universities can become machines for generating tuition revenues if value-oriented professors and staff do not continuously remind their administrative colleagues that the institutions are worth supporting, first of all, for their devotion to learning, education, and disinterested research. Similarly, medical groups can become machines for generating patient revenues if value-oriented doctors do not make cost-conscious, high-quality patient care part of the organizational environment. Value-oriented agents, including their leading professional specialists, can prevent organizations from slipping into the goal displacements to which they seem chronically prone.

In high-functioning organizations, senior managers and professional staff share the responsibility for value orientation and find consistency in the values they espouse. Managers can in fact do a great deal to reinforce commitments of professionals to the ideals of client service. Ritual occasions, such as quarterly or annual meetings, provide regular opportunities to celebrate the ideals of the profession and the professional organization. Organizational leaders who want to appeal to the idealism of their staffs typically use these ritual occasions for exactly this purpose, among others. Awards and recognitions that are fairly distributed for outstanding contributions and exemplary performance of duties are another reinforcer.

In other cases, a system of checks and balances can help to keep the client in focus. Where professionals are prone to feather their own nests, as is often the case, a high functioning organization can help them to maintain focus on efficient and effective delivery of services. Where organizations are prone to focus on revenue, which is also often the case, value-oriented professionals can insist that pursuit of revenue remain conditional on quality of service. These checks and balances lead to many compromises in organizational life, compromises that are fully satisfying to no party but that generally preserve more than a semblance of value commitment.

Mutual responsibility and checks and balances can go only so far, however. No single mission or broader social purpose exists for any large organization or any large professional body. Conflicts of purpose are normal. In a public university, for example, the value of maintaining educational standards and the value of serving underserved populations may be equally appealing, but the two will not always easily co-exist. In a hospital, the value of patient-centered care and the value of seeing many patients who would otherwise remain untreated are both appealing values, but again they produce an inherent tension. Leaders in both organizational and professional life are not defined solely or principally by their ability to speak to larger social purposes, although that is a qualification. They must also be skillful political actors in order to be effective agents of substantive rationality. They create the conditions to manifest the values (and the related interests) they represent. They contend with competing values and interests when they come into play. They provide a compelling case, where necessary, about the priority of one set of values over others. And they identify acceptable compromises where compromise is the advisable course of action.

# The Social Responsibility of Individual Practitioners

What, finally, of the responsibility of individual practitioners in the context of these multiple layers of organizational and political embeddedness? Individual professionals are in many cases oriented to ideals that they may, under the right organizational conditions, be put into practice. At the same time, it is essential to recognize that ideals related to responsibility come in more than one "flavor." I will focus on three ideal types of moral thinking that are common in the professional stratum: nurturance, duty, and exchange. The idea of care for non-related dependents is an appealing rhetoric and moral regulator for political liberals, as James Hunter (1991) and George Lakoff (2002) have both emphasized, based on the concept of nurturance. This orientation is frequently aligned with the ideals of serving the underserved. For those with a more conservative outlook, the idea of performing one's duty to abide by a set of transcendent principles will be more likely to resonate, because conservatives tend to see the world in terms of obligatory absolute principles (see Hunter 1991; Brint and Abrutyn 2010). The specific transcendent principles occupational conservatives honor undoubtedly reflect differences among the specializations that make up the professional stratum. In the world of academe, for example, they include scrupulous treatment of evidence, skepticism in relation to truth claims, conscientious sourcing, engagement with the literature - and of course many others that would not be as relevant to lawyers, doctors, or engineers. Utilitarians, another prominent group, are a much more difficult party to engage in discussions of professional responsibility. But some utilitarians have an ethic that can be influenced by ideals of professional responsibility. This ethic is built around a sense of the reciprocal benefits of exchange. Many utilitarians who are not simply oriented to their own self-interest can see that clients bring benefactions in the opportunities they provide for stable practice and good salaries. Their desire to add value for their clients is in its own way both moral and responsible.

#### Conclusion

The argument I have advanced can be summarized concisely: It is tempting to call for a restoration of a sense of social responsibility among professionals, given the strong ethical claims that have been part of the cultural and political construction of professionalism since the time of the gentry professions. In my view, it will not be possible to revive social trustee professionalism – or any derivation from it – in an effective and honest way without emphasizing the centrality of professional skill and the moral potential inherent in the social relationships affected by skill. It will also not be possible without appreciating the fundamental significance of organizations for absorbing society's claims on professionals and for shaping the contours of professional responsibilities. Finally, it will not be possible to do so without acknowledging the contested terrain of social responsibility and the role of

non-professional actors in definitions and redefinitions of this terrain. We can describe this terrain as "broader social purposes," if we like, but we should be aware of the extent to which these purposes represent abstractions of interested parties' successful claims, a selection from a spectrum of possible purposes.

This is the broader context in which the value-oriented practitioner will continue to matter. What values might practitioners hold that will help to bring the moral element back into professional-client relations? The answers to this question fall roughly along a political spectrum, with care-giving images appealing to liberals, transcendent occupational principles appealing to the duty-bound, and the gratitude owed for benefits appealing to at least the more exchange oriented among utilitarians.

The "responsibility" concept cannot be revived in a single dominant form in our age of experts and large organizations, but it can be cumulatively powerful in its many distinct active lines of organizational design, practitioner training, and moral thinking joined to practice.

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