**Professional Responsibility in an Age of Experts and Large Organizations**

**By Steven Brint**

The topic of professional responsibility is freighted with layers of hopeful expectation and irreverent skepticism. The hopes derive ultimately from the original situation of the fee-for-service professions, whose members developed special trust relationships with clients. These trust relationships influenced subsequent professional ideologies emphasizing the social responsibility inherent in the professional's role in society. The skepticism comes from the observation that claims to high ethical standards frequently serve as rhetorical cover for self-interested activity. The playwright George Bernard Shaw, who claimed that professions were a "conspiracy against the laity," was one of the first notable skeptics. The sociologist Eliot Freidson turned Shaw's witticism into an institutional analysis. His book, *The Profession of Medicine* (1972), explored the power of labor market monopolies and information asymmetries as preconditions for professional *irresponsibility* (including overly-high charges and poor treatment of patients). For skeptics notions of professional responsibility, and the formalized ethical standards that accompany them, were part of the protective wall defending professional privileges built on these market shelters and information asymmetries (see, e.g. Larson 1979; Collins 1979: chap. 6). Not surprisingly, when sociologists of the professions hear the term "professional responsibility," they may have a mixed response; they think of elevated ideals and simultaneously of Elmer Gantry-like characters with one hand on the Bible and the other in someone else's till.

Although the skeptics surely make valid points, the ideals of professional responsibility are not reducible to self-serving rhetoric. They are better considered foundations of a symbolic stance that allows professionals to make claims for occupationally-based status in society. As such, they *can be* active influences on work practice, at least for those who have a feeling for the value principles ideally embedded in work.

Nevertheless, the concept of professional responsibility as ideal and practice has been in tatters for many years. It will be one goal of this paper to diagnose the reasons why the idea went out of fashion in the later 20th century. This volume represents part of a counter-movement to revive and modernize the idea of professional responsibility. A common theme among the authors is that professional responsibility can be re-grounded in a commitment to improving the welfare of citizens in underserved communities. Some elements of our culture support such a reorientation, but it will not be particularly popular among professionals who work outside the sphere of human services. It will fail, for example, to resonate with most accountants, engineers, and corporate lawyers.

Others have in my view wisely eschewed this narrowing of the referential grounds for professional responsibility. William M. Sullivan, who writes in this volume, is closest to the Progressive Era traditions of "social trustee professionalism" that I will discuss. This tradition focused on the civilizational impact of the professions, not only on their contribution to improving the lives of the least advantaged. His contribution is to show how the strengthening of professional education, particularly in its "moral dimension," is vital to the revival of professional responsibility in action (see also Sullivan 2005). For reasons that I will discuss below, I am doubtful that such a revival is possible. Paul Adler, by contrast, breaks with the older tradition and offer a view of professional responsibility as grounded, not in the individual

practitioner, but rather in the "collective worker," or set of cooperating professionals who are engaged in work with clients.   In this model, it is not up to the individual doctor to have the highest ideals of medicine in mind as he works with patients.  Rather professional responsibility is rooted in the team of doctors, nurses, allied health workers, and hospital administrators who are jointly engaged in producing treatment (Adler this volume; see also Adler and Heckscher 2006; Adler, Kwon and Heckscher 2008; ).

Adler's is a view with which I find myself in sympathy.  One section of my paper can be considered an extension of Adler's approach beyond the work team to the organization.  I will argue that neither the heroic individual practitioner nor the high-functioning work team can manage the complex and burgeoning requirements of contemporary professional practice in large organizations.  Instead, dedicated organizational units are necessary to compensate for the bounded rationalities and bounded performance perspectives of both individuals and work groups.  At the same time, I will not abandon the notion that the individual practitioner matters. I will argue that if notions of professional responsibility are to be successfully reframed, a proper consideration will need to be made both for occupational skill and for the weaker boundaries now separating professionals from both clients and client advocates.  I will also argue that ideals of professional responsibility come in more than one legitimate form.

I will begin with an account of how ideals of professional responsibility arose in the Anglo-American context during the period of the original "trust" professions, how these ideals became transmuted into the social trustee professionalism of the late 19th and early 20th centuries, and why the organizational revolutions of the 19th and 20th centuries left them resonating with only a subordinate fraction of the professional stratum by the mid-20th century.  This context will

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provide clues to viable approaches for reweaving ideals of professional responsibility in age of experts and large organizations.

*The Origins of "Social Trustee Professionalism"*

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 (Elliott 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 advisor 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 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).

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The rise of large organizations in the 19<sup>th</sup> century created demand for cadres of new and 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 professions by emphasizing the responsibilities of professionals as 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. 94-5).

These functions, for Tawney and 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 cultural and political priorities: not only elevated social purposes, but the idea of work in a calling, a rationalist frame of mind, collective self-governance, and high levels of self-direction in day-to-day activities.

In its inclusiveness, the ideology of social trustee professionalism served many important functions for the emerging 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, framed in occupation-specific terms, were the conventional wisdom of the leaders of professional associations during the 19th and early 20th 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. 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. We also coded the inaugural speeches of presidents of four prominent colleges and universities. We broke the speeches into four time periods of comparable length and acceptable correspondence to distinctive periods in the history of the professional middle class: 1875-1899, 1900-1929, 1930-1969, and 1970-1995. 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 up to the Great Depression.  References to

civilizational functions were 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 trusteeship 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. Presidents of ACS and ASME began with little interest in sociocultural matters and continued (so far as we could tell from limited data) to have little interest in them during most of the period studied. Instead they focused on the technical achievements of their fields. (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.) During the early years the presidents of the American Psychological Association worked hard to establish the scientific *bona fides* of the new discipline, 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 of the fast-growing professions – for example, engineers, accountants, and investment bankers – 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 professionals from 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 self-regulation 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, but more defensible ideology of "expert professionalism" – the focus on the value of specialized skills requiring higher education -- filled the ideological space conceded by the few remaining advocates of social trustee professionalism (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.

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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-20th 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. 231-2).

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-20$^{th}$ century to today, it seems clear that 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. [1] The ideology of social trustee professionalism persists 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 for-profit 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.  These concerns also have an ethnic and gender distribution.  As I wrote in *In an Age of Experts:* "(H)igh-achieving nonwhites and women have taken on the lion's share of such 'social justice'-oriented activism as continues to be found among professionals" (Brint 1994, p. 207).

*Liberal Ideas about Professional Responsibility and the "Knowledge Economy"*

We can gain a sense of the size of the group to which new, more liberal ideas about professional responsibility might appeal by looking at the range of industries in the "knowledge economy" and then picking out those in which such a revision in social trustee professionalism would be most likely to find resonance.

To define the industries of interest, I will use a simple criterion: knowledge economy industries are those in which at least five percent of employees hold graduate or professional degrees. This is a simple quantitative way to capture the central proposition about knowledge economy industries; trained expertise is at the heart of what they do. 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 five percent criterion included all industries that previous writers had identified as falling within the sphere of the "knowledge economy." The list was agnostic about the centrality of any single one or any set of these industries. It 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.

Table 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 at least 20 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 20th century through 2010 (see Brint 2001).[2] The "knowledge economy," 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,

health services and hospitals, education services (obviously including colleges and universities), legal services, and nearly all of government. [3]

To what extent is the "knowledge economy" likely to be appreciative of emphases on reducing inequality and serving the underserved? I will use an imperfect but nevertheless suggestion (and widely used) measure of political liberalism. Politically liberal "knowledge economy" industries are those showing a statistically significant difference in mean scores on a 7-point liberal-conservative scale between members of the industry and the American adult population. In Table 1 I have bolded the industries in which liberal political views tend to prevail (see also Brint 1994: chap. 5; Brooks and Manza 1999; Gross 2013). The level of liberalism in these industries is significantly higher than that found in the American population as a whole during the period studied (1990-2010).[4] I have also italicized those industries in which political views are more liberal than the mean but differences in means do not reach statistical significance at $p < .05$. These are industries in which future change may lead to stronger identifications with liberal politics. 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 the italicized near-liberal industries, as well as the bolded industries, slightly more than half of the "knowledge economy" industries listed (28 of 57) are in the liberal camp, but fewer than half (43%) of the total number employed in "knowledge economy" industries are in the liberal camp. Elementary and secondary schools, national security and legal agencies, banking, and business services industries are large employers and tend to be more conservative than liberal in outlook. If we include only the bolded industries, those in which

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differences in political outlook are statistically significant from the American population at large, the politically liberal "knowledge economy" sector shrinks considerably both in the number of industries included (14 of 57) and in the proportion of employees that constitute the "knowledge economy" sector in this analysis (21%).

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*Table 1: U.S. "Knowledge Economy" Industries, Late 20<sup>th</sup> & Early 21<sup>st</sup> Century*

| | *1990-2010 Cumulative Percent w/ Graduate Degree* | *1990-2010 N* |
|---|---|---|
| **Offices of health practitioners, not elsewhere classified (n.e.c.)** | 0.500 | 42 |
| **Colleges and universities** | 0.398 | 723 |
| **Legal services** | 0.350 | 297 |
| *Offices of chiropractors* | 0.333 | 24 |
| **Noncommercial educational and scientific research** | 0.311 | 61 |
| Elementary and secondary schools | 0.299 | 1904 |
| *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 |
| Executive and legislative offices | 0.217 | 23 |
| **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 |

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|---|---|---|
| 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 | 1226 |
| *Photographic equipment and supplies* | 0.094 | 32 |
| *Business, trade, and vocational schools* | 0.091 | 33 |
| **Membership organizations** | 0.088 | 102 |
| Petroleum products | 0.087 | 46 |
| Public finance, taxation, and monetary policy | 0.086 | 81 |
| Justice, public order, and safety | 0.079 | 519 |
| **Theaters and motion pictures** | 0.077 | 155 |
| Banking | 0.077 | 470 |
| Petroleum and coal products | 0.073 | 124 |
| Optical and health services supplies | 0.072 | 83 |
| Aircraft and parts | 0.072 | 125 |
| **Printing, publishing, and allied industries, except newspapers** | 0.066 | 272 |
| Advertising | 0.064 | 78 |
| **Book and stationery stores** | 0.064 | 47 |
| Real estate, including real estate-insurance-law offices | 0.063 | 509 |
| *Newspaper publishing and printing* | 0.060 | 116 |
| Insurance | 0.060 | 452 |
| *Air transportation* | 0.058 | 155 |
| Credit agencies, n.e.c. | 0.058 | 156 |
| Total | | 13019 |

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

Source: Cumulative General Social Survey, 1990-2010

Support for liberal policies on poverty, access, and equity extend beyond these politically liberal sites, of course. Some professionals in every one of the industries listed are liberal in political orientation. Moreover, 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. Yet when questions move away from attitudes about religion and equal opportunity and toward issues of economic distribution and taxation, most professionals shift back toward the conservative positions typical of business people (see Brint 1994; Brooks and Manza 1998).

*The "Collective Organizational Worker"*

Although this analysis provides context for discussions of the viability of new ideas about professional responsibility that emphasize social equity, it skirts the primary issue: How should we think about professional responsibility in the 21$^{st}$ century? My answer begins with the proposition that professional responsibility exists (or fails to exist) within organizational settings. 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

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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. Professors are expected to be achieve high levels of performance in each of these designated areas. During review cycles both campus colleagues and university administrators determine whether faculty members have achieved an acceptable level of accomplishment in each area. Professors have a challenging time achieving high levels of accomplishment in all three areas of evaluation. We can see this by the number of faculty members who choose to focus on research while maintaining a teaching record that is merely adequate, and the fewer number of professors who choose to focus on their teaching or service to the detriment of their research. 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 advisors 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 2011). Coming 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.

By probing a little further into the reasons for an expanding environment of professional responsibility, we can understand more clearly why the (partial) outsourcing of social conscience is necessary in an age of experts and large organizations:

(1) Large universities require large amounts of revenue to thrive. Sources of support are no longer institutionalized, if they ever were. People do not support universities out of habit; they have to be engaged to understand why the university needs and deserves their support. Offices consequently grow to manage key relationships. The federal government is the largest source of funds for many universities, and it is not surprising therefore that professional staff from offices of research become involved in monitoring and managing relationships with funding agencies. For public universities, state politicians are another important source of funds

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and not one that can be depended on through thick or thin.  Something similar is true for donors and alumni in private institutions – hence the huge development staffs at these institutions who manage relations with donors and alumni.

(2) Students no longer limit their academic activity to going to class and studying.  They required advising because of the complexity of curricula and the number of courses universities offer.  They desire career counseling because education is a gateway to work for most.  Faculty members have neither the expertise nor the time to provide academic or career counseling.  As tuition rises, so too does student expectations for academic support services, special study opportunities and internships, state-of-the art classroom environments, and round-the-clock access to course materials.  Professors cannot manage all of these expectations, but the university as an organization with specialized offices can.  Communities also have rising expectations.  One common desire is for outreach to K-12 education through teacher training or student pipeline activities.  In land grants outreach to agriculture is long-standing but increasingly off-loaded to technicians, while faculty members work on the genomics of pests and crops.   Most university communities expect contributions to entertainment (through sports and arts) and to the solution of their economic and social problems.

(3) One multi-million dollar law suit equals a vast expansion of regulatory law.  Recently a UCLA chemistry student was tragically killed while operating equipment in a laboratory.  The fallout from this case led to huge expenditures in training for faculty and graduate students on student safety, as well as a large apparatus for monitoring the safety of laboratories (Christensen 2013).  Equal opportunity laws have led to a vast increase in reporting on searches, promotions, and diversity training – all conducted by specialized offices.  The public's skepticism about the efficacy of undergraduate education has fueled a huge growth in offices charged with complying

to accountability demands, including data on student learning outcomes, graduation rates, and employment. The public has legitimate interests in universities that conduct their business in safe, fair, ethical, and accountable ways. But these interests also expand the role of professional responsibility far beyond what professors are able to design themselves. They require organizational solutions. Nor is the public the only source of increasing regulatory oversight. Universities themselves have instituted huge regulatory oversight systems to convince their benefactors and boards that they are using monies wisely. These efforts have spawned new "accountability technologies" for payroll standardization, travel planning, bulk purchasing, and many other mundane features of university business life.

(4) Sheer size and complexity are other causes of outsourced social conscience. As universities grow, they need more accountants, more information technologists, more research administrators, and more advisors. As these strata grow in number, expectations that they will be the primary sources of decisions in their areas of expertise also grow, as do their centers of power on campus.

Paul Adler and his colleagues have shed light on how the division of labor affects contemporary conceptions of the "professional responsibility." Few professionals were ever solely responsible for the well-being of their clients or patients. Most always worked in teams. This situation is 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

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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, Kwon, and Heckscher 2008; Heckscher and Adler 2006).[5]

Adler's work remains limited because of its focus on the individual case and the immediate workplace. He does not make enough of the organization's contribution to the successful performance of professional work in an environment of expanding expectations and increasing regulation. Distinct offices with trained surrogates are necessary to discharge "professional responsibility" under these circumstances. In tandem with Adler's conception of the "collective professional worker," I would consequently suggest the need for a complementary conception of the "collective organizational worker" at least in cases of large, professionally-centered organizations, such as research universities. Without the offices encompassed under this rubric neither the public's nor the government's expanding expectations of professionals' responsibilities could be met.

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.  The pattern of migration is itself an interesting topic for study.  My hypothesis is that 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.

*Three Questions*

William M. Sullivan is perhaps the most prominent modern advocate for a revival of social trustee professionalism.  Sullivan's proposals focus on creating a new generation of professionals who embrace a stronger sense of social purpose.  They derive this from educational training that includes a strong social and ethical component. There is much to like in Sullivan's analysis.  Sullivan is correct to point out that all work – not just professional work -- has inherent elements of responsibility.  He defines this as "the stance of intelligent responsiveness on the part of individuals to expectations of their social relationships." He is right to emphasize that this stance can be supported or threatened by the social and economic contexts in which professionals

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work.  I also agree with Sullivan that shoring up what he 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. He is right to point out that organizations that are constructed to reinforce trust are a valuable and important supplement to any improvements in professional education that universities and professional associations may wish to pursue.

Nevertheless, the different history and perspective I have presented here leads me to raise three questions about professional responsibility that do not align very closely with his proposals for reform.  I will ask them now.  I will also provide answers attuned to the framework I have developed above.

First, to what extent is the craft aspect of professional work just as "responsible" as the more broadly "social" claims Sullivan sees in the professional role?  Expert professionalism carries with it the spirit of a distinctive form of social responsibility and one that can be far more potent than 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.  For example, 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's say she feels responsible for enacting this normative ideal in all of her encounters with patients and other citizens. But let's 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 – here my own currents of irreverent skepticism re-emerge -- the rhetoric of elevated morality can deceive about the solidity of craft. 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 2 below, I provide an answer: professionals in two of the quadrants deserve our esteem and professionals in two do not. The common factor among those who deserve our esteem are effective craft skills.

*Table 2: Distribution of Professionals in Relation to Two Forms of Distinction*

Level of Craft Skills

|  |  | Effective | | Ineffective |
|---|---|---|---|---|
|  |  |  | I |  |
|  | High | Skilled Reforming Practitioner | I | Unskilled Reforming Practitioner |
| Moral Aspirations To Serve Society |  |  | I | |
|  |  | Skilled Practitioner | I | Unskilled Practitioner |
|  | Low |  | I |  |
|  |  |  | I |  |

Second, when we talk about professional responsibility, do 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 life style 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 2011). 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. The editors of this book assume that the next frontier of professional morality will be greater emphasis on the needs of underserved communities, but professional communities have shown themselves to be interested more often in technical skill building and civilizational

horizons than in underserved groups.  The latter will find allies in the professional ranks but their natural advocates are social justice activists, liberal parties, and government enforcement agencies.

Finally, if we follow the framework that the editors of this volume have developed, professionals are at once hard working laborers, skilled crafts people, creative actors, and, in addition, upholders of the special responsibilities that their clients and the larger society place on them (see Mitchell and Ream, this volume).  Can we count on heroic practitioners to fulfill each of these role demands?  And, more important, would even this level of heroism be sufficient to meet professionals' social responsibilities?

We live in a world in which the work of professionals is prescribed by what publics are willing to pay for and by the regulations governments insist on.  It almost goes without saying that within this context craft skills are divided by organizations for purposes not just of efficiency, but also adequate treatment.  In medicine, most garden-variety ailments are taken up by physician's assistants or GPs, while serious or specialized maladies are given the attention they deserve from one of the enormous array of secondary and tertiary care specialists.  In education, English language learners, learners with disabilities, and honors students receive the attention they need and deserve from practitioners whose skills, we hope, align with the specific needs of these students.

Less obviously, something similar is true of the social responsibilities of professionals. Like craft skills, social responsibility becomes embedded within the organizational context rather than solely within the mind-set of the individual practitioner.  A few examples will make the point:  Are we concerned that professionals are not treating clients from different backgrounds in

an equitable manner?  The solution is partly educational, as Sullivan suggests, but also partly organizational.   In the typical case management will encourage the education of individual practitioners and, with the advice of specialists, also create an office whose job it is to administer policies to ensure equity and to field complaints about discriminatory treatment.   Are universities concerned that researchers may be violating the rights of human subjects?  Again, the solution is partly educational and partly organizational.   In this case it takes the form of a training program for researchers on the use of human subjects and an institutional review board to check that guidelines for the use of human subjects are followed.  Are HMOs concerned that physicians are too busy treating disease to help patients maintain healthy lifestyles?  The same mix comes into play:  General practitioners can advise about healthy lifestyles, but it is also necessary for management to create smoking cessation workshops, nutrition workshops, and departments of physical medicine.

The value-oriented individual practitioner is an inspiring role model, but not an adequate substitute for responsive and creative organizational design.  Few professionals of heroic stature could address the range of competing demands that are placed on them and their organizations by those who feel they have a stake in their performance.  Ultimately, the fiduciary responsibilities Sullivan associates with professionals properly belong with governing boards and senior managers who provide budgets and staffing for the small armies that are necessary to meet their organizations' responsibilities and to respond to complaints, including legal complaints, when those responsibilities are not met.

I do not take these points as rendering the values of individual practitioners moot. Value oriented agents, including their leading professional specialists, can prevent organizations from slipping into the goal displacements to which they seem chronically prone. 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.

In high-functioning organizations, senior managers and professional staff share the responsibility for value orientation and find consistency in the values they espouse. 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 under-served 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 Multiple Strands of Professional Responsibility*

Given a fractured professional stratum, working in very different types of organizations under bureaucratic and legal regulation, any approach to rebuilding the ideals and practices of professional responsibility wil necessarily take a variety of form.  Some of these forms come clearly into focus:

Rules and accountability mechanisms will be part of any solution, because professionals are not all inclined to practice in the best interests of their clients or knowledgeable about how to do so even if they are so inclined.  Checklists of best practices in maintaining sterile clinical environments and their strict enforcement are, for example, preferable to individual judgment (Gawande 2009).  Metrics that measure the performance of professionals are also essential at a time when bureuacratic regulation has superseded professional regulation, often for the better.

The struggle over accountability metrics will be part of any change to heighten professional responsibility.

Respect for technical 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 emphathy 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 tht craft skills can be realized consistently in practice.

Organizations can 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 contriburtions and exemplary performance of duties are another reinforcer. Appointments that reflect the ideals of the profession, together with specialized skills needed in executive roles, are another.

Individual professionals are also oriented to ideals that they may, under the right conditions, frequently put into practice. But these ideals come in more than one "flavor." 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 as it is

on a concept of nurturance. This orientation is closely aligned with the ideals of serving the under-served promoted in this volume. For social conservatives, the idea of 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 conservatives honor undoubtedly reflect differences among the occupational 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 are a tougher group to engage in discussions of professional responsibility. But even utilitarians have an ethic that can be influenced by ideals of professional responsibility. This ethic is built around a sense of the benefits of exchange, rather than a commitment to care-giving or transcendent principles. Surely many utilitarians are not simply oriented to their own self-interest and can see that clients bring benefactions in the opportunities they provide for stable practice and decent salaries. Perhaps it is too much to hope that utilitarians could also come to see the benefits that clients bring to the broader community of practitioners. But, after all, what greater benefaction can there be in an age of experts than the license and opportunity to practice a refined and civilizing craft?

*Conclusion*

The argument I have advanced can be summarized concisely: 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 also will not be possible to do so without acknowledging

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the contested terrain of social responsibility and the role of non-professional actors in definitions and redefinitions of this terrain.  Above all, it will not be possible without appreciating the fundamental significance of organizations for addressing 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' 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 principles appealing to social conservatives, and the gratitude owed for benefits appealing to at least some 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 rhetoric and thought joined to practice.

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**Notes**

[1] 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 term, or, if one prefers, as members of a common social stratum (see Brint and Proctor 2011).

[2] 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."

[3] 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 percent of GDP in the last quarter of the 20th century (Brint 2001), growing from just over one-quarter in 1959 to nearly two-fifths in 1997. With the help of graduate

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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 close -- 43 percent of GDP.

[4] I would like to thank Jacob Apkarian for running these analyses of the political views of employees of "knowledge economy" industries.

[5] 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.