

## What does professionalism in health care mean in the 21st century?

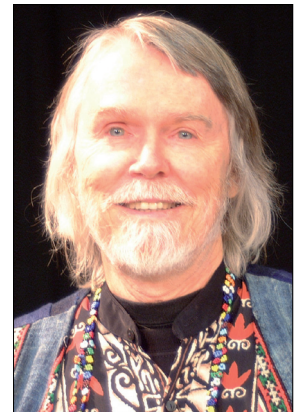
Central to health care practice and the moral contract between the public and the profession lies professionalism and professional integrity. The purpose of health care practice is to *always* care for the ailing and the sick, promote health interests and well-being and strive towards healing environments. Professionalism, which sets the standard of what a patient should expect from his or her health care practitioner, is an ideal that should be sustained.<sup>1</sup> Health care practitioners are important agents through which scientific knowledge is applied to human health, thereby bridging the gap between science and society. But health care practice goes beyond just clinical or technical excellence. It is more than just knowledge about disease. It is also about experiences, feelings, and interpretations of human beings in often extraordinary moments of fear, anxiety and doubt. In this very vulnerable position, professionalism underpins the public's trust in health care practitioners<sup>2</sup> and professional integrity and honesty should be a measure of the extent to which the professional's reputation and credibility remains assured and untainted.

Political, social and economic factors together with advances in science and technology have reshaped attitudes and expectations of the public and health care practitioners, whose roles and professional responsibilities up till now were clear and unequivocally well understood. In addition, several notorious failures of professionalism, including avaricious pursuits, with concomitant adverse media coverage have undermined public trust in health practice and have led to a questioning of traditional values and behaviour, challenging characteristics that were once seen as the hallmark of health practice.<sup>2</sup> Professional integrity can easily be tainted when the nature of the practitioner-patient relationship starts to become transactional and patients are viewed as customers and health care as a commodity. Moreover, we have progressed to an era where professional autonomy has had to give way to accountability. Perceptions of practitioners as healers have also been eroded by error and iatrogenic injury.<sup>3</sup> What's more, an emphasis on litigation as a tool in social justice has led to a greater level of public awareness of the harms that practitioners can be guilty of.<sup>4</sup> Without doubt, trust is critical to successful care and where patients cannot trust their practitioners, the quality of their care could be seriously jeopardised. It is not because practitioners have special knowledge and technologies that they should be trusted. They are trusted only if this knowledge and technology is firmly attached to values that are explicit, understood and altruistic. The principal objective of practitioners is to treat their patients well. Unfortunately, survey data over decades reveal that the level of confidence and trust that was accorded the profession several decades ago has been substantially eroded.<sup>5</sup>

Compassion, competence and autonomy are judged to be core foundational values in the practice of health care. Understanding and concern for a person's distress is essential in this context. An extremely high degree of competence is expected and required of practitioners. This is not limited to scientific knowledge and technical skills, but also includes ethical knowledge, skills and attitudes, and an understanding of human rights and health law. As new ethical issues arise with



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changes in practice and its social and political environment, it is important that knowledge and skills are regularly updated and maintained in this arena. Autonomy has changed the most over time, with practitioner autonomy being moderated by governments and other authorities and patient autonomy gaining widespread acceptance.<sup>6</sup>

The ethical and moral duties accorded to health practitioners impose an obligation of effacement of self-interest on the practitioner that distinguishes health practice from business and most other careers or forms of livelihood.<sup>7</sup> Pellegrino states that there are at least three things specific to health practice that have led to this position. Firstly, it is the nature of illness itself with patients being in a uniquely dependent, anxious, vulnerable and easily exploited state, being forced into a position of trusting the practitioner in a relationship of relative powerlessness. Furthermore, when practitioners offer to put knowledge at the service of the sick, they invite that trust. Hence, a health need in itself constitutes a moral claim on those equipped to help. Secondly, the knowledge gained by the practitioner is not proprietary as it is acquired through society sanctioning certain invasions of privacy, e.g. experimenting with humans and allowing for financial subsidisation of health education. The practitioner's knowledge is therefore not individually owned and should not be used primarily for personal gain, prestige or power. Finally, the oath that is taken at graduation is a public promise that the practitioner understands the gravity of her/his calling and promises to be competent and use that competence in the interests of the sick.<sup>8</sup>

Professionalism in health practice matters just as much in the 21st century as it did at the time of Hippocrates over 2 500 years ago. It has its roots in almost all aspects of modern health care. Practitioners must accept that financial and personal gain are not all-important and need to look at other ways to think about what else matters. Moreover, social responsibility, social conscience and a resilience to external pressures, political or otherwise, that interfere with the 'best interests' principle are more important now than ever before. Core values, principles and competencies must be reflected upon and the

question of what it means to be a health care professional and what is required to claim all privileges granted by society to health professionals should be re-appraised.

The *South African Journal of Bioethics and the Law* has been launched to provide a forum for experts and health care practitioners to engage with their colleagues in debate about the pressing ethical and legal issues confronting the medical world during the 21st century.

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