June 21, 2000. Interview with Martin E. Marty, PhD, Fairfax M. Cone Distinguished Service Professor, University of Chicago Divinity School and George B. Caldwell Senior Scholar-in Residence at the Park Ridge Center for the study of Health, Faith, and Ethics, Chicago. The interview is being conducted by Drs. Judith P. Swazey and Carla M. Messikomer at Dr. Marty's home.

Messikomer: Can we begin by asking you a little bit about your personal biography, starting with your family history back when you were a young boy?

Marty: I was born in Nebraska in 1928. My father was a teacher; I have one brother, a teacher, and one sister, a teacher. I went to a little high school in a little town there and everyone decided it was confining, so I went off to a Lutheran-run prep school in Milwaukee. I always knew I liked to write, and I always liked history. Religion was big at the school. It was pre-theology if you wanted that, and you could stay an two extra years, German gymnasium style. During that time, with my second wife's late first husband, I got involved in many kinds of things -- debate, junior achievements, editing, serious entertainment of ministry but never giving up on the writing theme. Every afternoon I would borrow a street car pass and go to the Milwaukee library. I dreamed of reading through the modern poetry section and got pretty far; it was something I really enjoyed. The war ended the year I came of age and I went then from that prep school and junior college to Concordia Seminary in St. Louis, which is a school in the Missouri Synod in which I was brought up. That was and remains a very conservative Lutheran
body. I hit it in very good years; a good education. By the time I had gone there I had had five years of Latin, five of German, four of Greek, two of Hebrew, so you really got a dose of classical education. At Seminary I became involved in field work, which took about a dozen of us Friday afternoons out to Koch hospital, an old fashioned sanitarium where inner-city people were dying. I can never get over the fact that there was a system of numbers -- "four", "three", "two" or "one" above the beds. If it said "one" it was your last week on earth. You could look up to see how you were doing. We just dreaded going out there, but coming back we would sing and have a beer and have fun. I suddenly found out how rewarding that calling was and I let go any doubts about ministry and enjoyed it.

In my last year at the theological school -- to show how contingency plays in life -- a friend and I invented a fake theologian. His name was Franz Bidfeldt. We quickly developed our writings about him into satire on the faculty and the school and the system. An artist, Siegfried Reinhardt, drew a portrait of this fake man. Notable scholars played along. Jaroslav Pelikan, now at Yale, announced that his next book was to be on this subject. Another famous professor wrote a devastating review of it. We had Bidfeldt catalogued in the library. We produced a waiting list at the book store.

Now, I was scheduled to be a Lutheran minister to displaced Baltic people in London. Over the Christmas holiday I was asked to check with my fiancée and parents about an overseas assignment. I was all but ready to buy Covent Carden
tickets. Then I received a telegram, which is how they used to communicate. It
was from the dean: come back a day early. It so happened that the day before
Christmas, in our student magazine, I had done a fake review of this fake book by
this fake author.

Of faculty members who were around over Christmas, half were in on it
but the other half got suspicious and then they really got angry. The dean read me
the riot act. I could see I was in trouble, so I asked to meet the president. The
president was a minister who had been a sort of Lutheran chaplain to the Mafia in
St. Louis. Cardinal Ritter, I had been told, got tired of burying the hoods, so they
turned the burial of these over to this Lutheran. I knew I could do a deal with him.
I admired him greatly, he was a good man. At ten that night I knocked on his
doors. After our chat he said, “I just have one question: is this one of us or is this
all of us?” I said, “it’s all of us,” He said, “you’re lucky, because if it’s one of us
they’d think it’s one professor being satirized, and you’d be out.” But what they
did decide over Christmas was that “you are too immature and irresponsible to
represent the church in England and you need seasoning, so we are going to have
you be a curate, an assistant pastor to a good strong pastor.”

As I left the president also said, “the other part is you are not allowed to
print anymore on this for the rest of this year, but I just want to tell you it’s the
funniest damn thing that has happened since I’ve been here.” He was carrying out
orders even though he was president.
One month later a very notable minister from River Forest, Illinois, who was giving lectures at Seminary, asked if I’d go out for a hamburger and beer. He said that the president had talked to him and he and I should have a chat. The bottom line is I accepted that congregation’s call. It was written in that the assistant pastor had to do doctoral work. The parish turned out nine PhDs in the two or three decades after World War II through that process.

What I’m leading up to is: I would never have spent a day in graduate school had it not been for the fact that I was immature and irresponsible and being punished. Even then I tried to evade doctoral level work. I went to a Lutheran seminary in Chicago. Two summer session professors, one who later became dean at the Divinity School of the University of Chicago and one who was America’s most notable historian of religion at that time, Sidney E. Mead, taught there in summer. They liked me and said that if I’d come there they would give me a full fellowship. So I went. My wife was pregnant, so I hurried. I was just there two years to get the doctorate. Then I went back and started a parish west of O’Hare field in a booming area, not quite Levittown, but that kind of place. It went very well. I spent seven years at that. Every year the dean would call and ask, “When are you coming to teach at the University?” Finally the congregation grew so fast that I either would have had to give up writing -- I was writing for the Christian Century, and I had published a couple of books -- or just fall apart.

Since we had two foster children, we couldn’t leave Illinois, so we knew
that if I was going to teach, this was it. So after seven years I went to teach and
taught there 35 years. My field throughout has been American religious history.
Originally I put it in the context of Atlantic culture. I did northwest Europe in
particular -- I like comparative studies. I became an associate dean for five years,
1970-75. In order to get the dean we wanted, I had to serve. It was hard being
associate dean to a Japanese dean, but I admired him and I liked the place.

Some years after I went back to full-time teaching the work shifted in a
little different direction in that comparative studies became more consuming. For
one thing, the Park Ridge Center was developing. I'll come back to that in a
moment. But also the American Academy of Arts and Sciences asked me to lead
a six-year, five-volume, 200-scholar study comparing militant fundamentalisms
around the world. Which we did, focusing on, I think, some 23 religions. For the
Salzburg American Studies Seminar I also spent two years working on three
projects on "religion and ethnonationalism." I'm now marginally involved, but I
keep an interest in the Carter Center's -- Emory Law School's -- studies of human
rights using a comparative model. Little quickies like some service before the
1995 Cairo conference on population and development. Park Ridge Center's
CEO, Laurence O'Connell, was to have led it but his wife had cancer and he
couldn't go that very weekend. So I got involved and I've stayed interested in the
population and development question. At the table there we had about thirty
people from some twenty nations, some fifteen religions, discussing their religious
outlook. I’ve just gotten to like that kind of thing very much.

And finally, my parish happened to be very near Lutheran General Hospital, which years before had moved out of the inner-city. It had been founded by some Norwegian-American Deaconesses. None of their constituency was left, and I don’t think they had the resources to stay, so they moved out. But under the leadership of some people with conscience, who wanted to keep people at this hospital, some “faith-based” projects started, became prosperous and they began a “Foundation for Human Ecology,” I think it was called. I recall that when I was a minister there were 64 chaplains on that hospital staff. I was at one of the nearest parishes, so they would often invite me in. I also made pastoral calls there all the time. The leaders pioneered in some of the religious ethics’ discussions. The hospital didn’t yet have an ethics panel, but it had gatherings that included psychiatrists, nurses on duty, chaplains, a guest rabbi, physicians, etc. We would discuss cases; I got so interested in these dramas. Even though at that time these inquiries weren’t so developed, you almost inevitably became a participant observer. They’d say, “This guy needs someone to talk to, but he hates rabbis, so will you go?” Thus I got into the inter-religious side of those things, but let the interest lie fallow during the next 15 years or so while I was teaching.

Swazey: You’re talking about right after graduate school?
This would have been 1958-63 when I did that “ministry” with them. Then for 20 years not much happened in this line. Suddenly several things happened to nudge me. First of all, a neighbor came over one night and said, “As a citizen you owe it to us: will you join the local McNeil Memorial Hospital board?” At that time there was a controversy over a doctors’ takeover. I served there for four, five, six years and really got enthralled. We would be asked as a board to make some decisions on extremely complex lawsuits about which I had known little in any technical sense. We got the nitty-gritty side of it all. There were surveys measuring the beginnings of new trends in patient satisfaction, for instance.

Everything about the clinical world interested me and I was on a lot of subcommittees that would meet on emergencies. So I had health care on my horizon, but without any vocational pull to it because I’m an American historian.

Then my wife took ill in spring of ’79. We had a year and one-half or two good years together. We traveled a lot and did a lot. But then later she had a brain tumor and succumbed in 1981. During that time I really got a chance to see the patient side. We were in and out of University of Chicago Clinics, well served there by the oncologists, radiation experts, professionals who transcended the boundaries. One of her two surgeons was from Pakistan. He would dispense little things to her out of folklore from his culture, sometimes of a religious character. The only time she had bad pain in the nine months after the brain tumor, maybe the only time she had to go back into the hospital, he helped her. A
month later she again had some pain and thought the tumor was relentless in
causing agony. And I remember, he said at that time, "In our culture we say all
ropes are like snakes but not all ropes are snakes; when there is a snake I'll tell
you."

The honesty and dispensing of this kind of folk wisdom meant a lot. The
tumor was in the right frontal lobe. She lost spontaneity though she never lost
rationality until the day she died. We discovered a kind of melancholy streak that
wasn't characteristic of her. I said something to the surgeon one day, and he said:
"One thing you've got learn, Marty, is that when you are in her kind of
circumstance, every patient has to have a right to pick his or her own way of
coping." This wasn't a whole philosophy; it was just a little thing. He probably
wouldn't say it to everybody and it wouldn't mean that he would never intervene,
but this was his way of saying "you get to know the patient."

During that time Lutheran General Hospital began to think about a more
sustained and larger outreach for the kind of work they had begun. The then
CEO, George Caldwell, initiated a series of conferences. You were at one of
these, Judith. It was really his vision, along with that of a couple of vice
presidents, an inner core of people that advanced the cause. George had noticed
that bioethics had been born, in a way, in theological schools. The pioneers were
people like Joseph Fletcher, James Gustafson, Richard McCormick, right down
the list, to William May. If the initiators weren't in theological schools, most
were still theologians. Then within the first decade the disciplines moved to state
hospitals, state schools, state universities. The academic ethos of ethics-without-
religion dominated. Religion was sent back to the chaplaincies and that was that.
But Caldwell and his team, out of their particular kind of experience, noticed that
other things were going on and wanted to probe them. The first thing they found
was that there were no such things as religion data banks from which you could
find out what Muslims think about health, and so on. So they started a thing we
called “Project Ten,” the antecedent to the Park Ridge Center. They
commissioned me to edit what has become a 15 or more volume series on health,
faith, and ethics. I could take that endeavor on because, essentially, the series
dealt with history, theology, and philosophy, not simply ethics, though ethics is
always a part of it. This project called for me to look for talent.

The very first of these meetings we held to organize the project was in
February of ’81. I remember that was the last trip my wife made. She had a
seizure while there, and colleague Larry Hoslt’s wife also had terminal cancer, so
two of the inner table at that meeting had urgent existential reasons to be involved
with crises like this.

That editing and convening work was my main first assignment. Then
after two or three of these conferences Caldwell and his team felt they had learned
enough that they wanted to institutionalize it. They asked if I would do a three
year feasibility study to see whether a center was in place. I said, “I don’t believe
in feasibility studies. I'll start a center and if you don't like it you can kill it off.”

So I gave them Tuesdays for several years, clearly bannering the notion that I was not an ethicist and didn't know medicine close up. My role would be to help shape an institution, and in a sense to develop a core of people whom we could trust.

I once asked George Caldwell, in his office on the tenth floor, “Why do you want to do this?” He said “Because the people on the nine floors below here and people like them are hurting.” “Of course,” I said, “you don’t go to the hospital unless you are hurting.” He said, “I’m not talking about the patients. I’m talking about care-givers -- nurses, staff, physicians, even administrators. People have to make decisions that they didn’t even dream about twenty years ago. Not one day in nursing school, med school, business school is spent on dealing with this.” He said, “Also, we know very well from around here that very often, if the climate is open to it, patients would bring up questions in terms of their deepest meaning systems, which are usually religious.”

Lutheran General was in a very heavily Catholic neighborhood, with predominantly Jewish suburbs to the east and a lot of us Lutherans to the south of it. We didn't yet have much pluralism but still enough that was interesting and complex. That is why I was to do the comparative studies. We started with a small staff, which meant essentially, you might say, that we were welcoming and purchasing talent, getting people on three to six month sabbaticals, holding
conferences, that kind of thing. Technically, not a single permanent ethicist was
under the roof. Then came publishing. We started the journal Second Opinion
and the Bulletin of the Park Ridge Center, started commissioning more books, and
did the first tentative little grant-seeking for projects. We thought ours would be a
little niche. It grew to reveal a chasm to fill and to bridge. That is, at first I
noticed that many of the people we approached shuffled and mumbled when we
mentioned the religious dimension. That all changed. Typically, I had read a
book by Arthur Frank, At Will of the Body, and was really moved by it. I wrote
him a letter that said something like: your book shows you to be somebody who
works right at the edge of spiritual questions, faith questions. He wrote back as if
with a sigh of relief. He had wanted to explore there for a long time, but nobody
had asked for more, and not all thought of the issues as proper. I think much has
happened in the subsequent 15 to 20 years. The issue now is more the quality of
what is offered as opposed to quantity, in regard to religion.

The original board included Dr. Daniel Foster from Southwest Texas
Medical. He is a very interesting, very technical physician with a warm heart.
But his mode of inquiry makes him sound very skeptical. We took a long walk on
a beach one day when they wanted me to start this center. I asked what he thought
such a thing should do. He said, “Well, I spoke at the University of Miami Med
School on the topic of faith, science and my vocation. Four hundred people
showed up. They had a respected physician talking about this and they listened
eagerly.” Foster added, “The interest is obviously there. I’d like to see it get into
the curriculum and so on.” George then said, “So I’ll put it this way, push the
edges at the Center, but don’t do anything nutty.” I asked, “What do you mean by
that?” “Well,” he replied, “do things that will legitimate the religious theme in
med schools and such places, so we can say ‘Hey, it’s alright to talk about these
things over here’.”

That was part of our charter. Add to the Caldwell and Foster exchange a
third one from the University of Chicago. Because of my interests I was
increasingly drawn in to things in the medical school and biological sciences.
Mark Siegler and Mary Mahowald had a clinical ethics program there. I would
come and talk on occasion about how extreme religion complicates medicine.
This was again my speciality; the study of fundamentalisms, hard line religion,
etc.. Soon I was on a doctor/patient committee, and in a reading group, with six
or seven physicians, six or seven humanists. We read Philoctetes and Job, and had
Kathryn Montgomery Hunter lead us through some John Stone poetry. Mark
Siegler, who as a clinician is a little more critical of philosophical ethics than I
would be, said that bioethics as it’s done normatively in med schools is wonderful
for prescripting, for anticipating, for setting up circumstances, for determining
justice, assuring rights, enforcing codes, knowing when to bend them. Textbook
ethics is really good for all that, he said, but in patient-by-patient form, when you
have to do something such as -- to use a crude language -- pulling the plug on
grandma or waiting for a transplant or do in vitro-fertilization or anything chancy,

I've never known people in those circumstances to phone the university and say,

“`I’d like one utilitarian, one pragmatist, one Aristotelian.”` They want to know,

“`What does my good doctor say, what does my good nurse say, what does my good chaplain say, what does my good uncle say?```

Philosophy and universities can help reason about what the good is, but
good in life is formed in a different way: through encounters, formed through the
womb and childhood, through the nursery, through school. So Dr. Siegler was
friendly to this kind of thing because at heart, when you introduce the faith
question in a pluralist society, you’re doing one more thing to get closer to the
patient. I like to say that bringing up faith does not solve anything. I’m really
convinced you can’t introduce religion and solve anything. You can ease, you can
console, you can legitimate, you can prod, you can do whatever -- my favorite
word is, you can *thicken* the discourse. This is a limited contribution, but still I
think a large mission. Those three stories tell three things that lead into the Park
Ridge Center. As the Center grew it became clear that a “Tuesday person” who
knew the history of some of this, didn’t mind administrating, and was bit of a
fixer was not capable of doing what we then needed. We moved downtown,
carrying the name of our original location with us, and we named Laurence
O’Connell, CEO. Has he been there twelve years now?
Swazey: Yes, eleven or twelve years; he came in 1989 I think.

Marty: That made possible a quantum leap into complexity: permanent staff, in-house researchers and ethicists, much, much more grant seeking, involvement with other institutions, things that we couldn’t do when we were out at a suburban hospital wing.

Swazey: How would you characterize Park Ridge compared to the places that are known as bioethic centers or programs: Hasting Center, Kennedy, the Case Westerns? Let me flip it first: do you think people think of Park Ridge as a bioethic center?

Marty: Well, I think they do, I don’t think they have any doubt about that. I think you can tell that from the Hughes grants, Rockefeller grants, Ford grants, Johnson grants, all these other kinds of things. Many of these places, like the Lilly Endowment and the Pew Charitable Trust, do have religion departments, but the grants to Park Ridge don’t come through that, they usually come through the clinical and medical side, stressing ethics. So they wouldn’t be subsidizing religion as religion. You can almost say that religion is instrumental to their larger purpose of spreading health. I don’t think that’s an issue. I would say one difference is that the Park Ridge Center is chartered more to reflect on some things other than
straight-out ethics. Call them, say, “understandings.” Other centers do not have
to take on the issue of the meaning of suffering in the light of religion. Care-
givers deal with suffering, they deal with ethical issues related to palliative care,
to the diminution of suffering. Then they step back and hear patients bringing up
the “why” question, “why is this happening to me?” The minute you introduce
faith, spirit, religion you cannot address this. Some thinkers would say that ethics
comes before theology. That is, you have to decide to do the good thing and then
you back up and see where the warrants for it are. But more often a theological
ethicist would say it’s a matter of “being” before “doing.” We are inevitably
drawn into “being” questions. That is why there are people like John Shea and
David McCurdy on the Park Ridge Center staff. Again, I don’t think that such
religious understandings would be in the charter of most bioethics centers. In fact
if they were they might muck up the other things that they are supposed to do.

There is room for more of the kind of things Park Ridge Center does in
complexes of secular hospitals and universities. There are religious studies
programs now in hundreds and hundreds of universities. I think theological
schools, tardily but to some extent, are doing more in this line of training people
and giving them resources.

Some places you have to ask these questions that go behind ethics. Again
a story, an illustration. We have a little group of people that meets every year on
Columbus Day weekend at Norman and Lyn Lear’s place, once Robert Frost’s
farm, in Vermont. We and friends like Bill and Judith Moyers and eight or ten
couples like that get together every year. One year they wanted to go to a nearby
Carmelite Monastery. A monk there told me, “we are not a tourist place.” So we
went to Bennington College and asked the president to line up 18 students. We
met one-on-one, and as a group. At the end we walked up the hill with the
president and I asked him, “What are you writing right now?” He was a Harvard-
trained philosopher who said he was writing a book on deontological ethics.
Norman Lear asked, “deontological, what is that?” “It comes from the Greek
word for duty. It means you have a duty; depending on your sense of the meaning
of life you figure that out, and do your duty.” Then Lear said to the president,
“What are you doing for dinner? Please come up the hill, because we are going to
talk about why you have to make some sense about what the meaning of life is
before you ask with what duty to carry it out?” If and in so far as huge numbers of
people formally make religion the base of that search -- that is probably the
American majority -- and informally great numbers more do, it seems to me that
somewhere you have to ask the deontology question and the other related
questions with this kind of background. That theme was casually suppressed.
There was no secular humanist conspiracy to exclude it. It was a habit of mind
and being in the higher academy, in the hospital, and everywhere else.

Swazey: Without a conspiracy theory approach, was it partly suppressed because it was so
inimical to an analytical philosophy approach, if you think about bioethics?

If you think about bioethics during the high years of analytic philosophy, when it had hegemony in Anglo-American universities, then there would be kind of a political wall to bump into because philosophers then screened out a priori all metaphysical questions. To voice them would be out of place; they may be embarrassing. That hegemony ruled out other kinds of things too, not just religion. It is an interesting thing, though -- historians of the movement now are looking back and saying that only in philosophy departments of universities did people ask those questions and answer them that way. I remember philosopher Ernest Gellner who wrote a book that analytical philosophers hated, *Words and Things*. He said you get the impression from those philosophy departments that if there were some bomb that took out our civilization and eons from now people could learn our language and came back to it, and came across all the print on these subjects at the time, they would think the biggest menace to human life at mid-century was the sweep of metaphysics, that everybody was “doing it.” Gellner said they were polemizing against something that only people at the edge of their own profession were doing. I think philosophy is a lot more ample today, all the way from the Rawlsian justice questions to the Rortyian pragamist questions to the phenomenologies from the Continent. I think language philosophy should always have its place, but it only has a place. So yes, religion
would be squeezed aside in part by that. It would be squeezed aside also in part by questions of separation of church and state -- a lot of tax-funded universities and hospitals were nervous. But religion and spirituality are all over the place again. About the hottest thing in politics is how are you going to cope with the belief systems of the people?

I sometimes say when I'm being ornery that only the people who are supposed to be observing the American people most closely don't know what is going on. Mass communicators and higher educators were among them. That's changing by the way. Mine was a cynical comment a few years ago. Today things have changed a good deal already. But the ordinary people then were thinking very differently and bringing different questions than those that were being addressed professionally. Therefore they paid very little attention to that pattern. Which has meant that sometimes bioethics as the public encounters it falls into the hands of amateurs or pop figures, because the public is going to ask them and get answers from them if the academic people don't speak up and speak clearly. A post-Enlightenment outlook that colors much discourse today. When people ask, "why didn't universities do more with religion?" I would say it's because in the habit of mind there they treated religion, including the most serious -- that of Buddha and Moses and Jesus and Maimonides and Buber -- the way I treat astrology. "Isn't it interesting that so many people believe that. Isn't it interesting that they line things up that way." So it wasn't hostility, it was
indifference. Religion wasn’t thought to have anything to say. Today there is a
good deal more openness to what it is that people bring to their attempt at
prevention of disease and their interpretation of it.

Swazey: And thus the surge of interest in courses in spirituality and medicine?

Marty: I don’t believe that you should set up a curriculum “to be relevant to that interest.”
I learned in the 1960’s that when schools took their signals from the sophomore
class and set up a curriculum, by the time they got it set up the culture had moved
on, and there they sat. Alfred Schutz makes a distinction between “intrinsic
relevance” and “imposed relevance.” The Human Genome Project says we had
better think fast about this, heart transplanter says we’d better think fast about that
-- these are expression of imposed relevances. Over the long pull intrinsic
relevance suggests that the deepest people keep thinking about the deepest things
year in and year out. You can draw on them, and they are often very close to what
the simple people are thinking all along.

Some years ago a minister in Pennsylvania, in a doctor of ministry thesis,
which is a practical, not an academic degree, interviewed 100 of his parishioners
through a several year period on “the Rabbi Kushner question” about “when bad
things happen to good people.” (The minister said he did a 100 because he found
it so much easier to work out percentages; he had a sense of humor about it all.)
What he found was that basically ordinary people, sometimes using different
language, ask almost all the same questions that the refined and trained people do.

There was a plea for theology. The theological books are talking about the same
things that parishioners talk, about but you'd seldom know it. Harper Collins says
that there is a serious audience for serious theology books in America. It might
only be about 12,000 people, most of whom get review copies. But what
theologians talk about in those books, writers like John Updike, and Madeline
L'Engle, Kathleen Norris, Tom Moore talk about. You can't keep readers from
them.

I'm not saying all philosophy has to be pop. I'm saying simply that the
public and professionals do talk about the same things and when that is forgotten
people get it elsewhere. A story I like to tell when the question comes up about
different modes of observation is from a column Mike Royko did once about a
January night in Chicago in 1967. The three networks that could afford all the
scientific approaches said Chicago would have a dusting of snow, which is a inch
or two in Chicago. WGN, which was a non-network studio and was not then as
well funded and equipped as now, gave us standard US weather bureau readings.
Then one WGN forecaster reported that this "old guy" in suburban Crystal Lake
had phoned in, from forty miles northwest of Chicago. He kept pigeons and
doves. When they cooed in threes instead of twos, watch out. They were doing it
that night. Then the next morning we woke up to 34 inches of snow -- the biggest
snow in Chicago recorded in history. Royko then wrote that what all these
students of science couldn’t catch, a couple turtle doves out in Crystal Lake
captured — that nearly two billion tons of snow were on the way.

I use that as sort of a symbol of the fact there are a lot of ways to observe
the same things. Two billion tons of snow in this human analogy would represent
the weight of human suffering, human care, and the human scientific
breakthrough. I think what the Park Ridge Center tries to do is to remind people
that ours is another way of looking. Park Ridge ethicists don’t feel out of place at
any kind of ethics gathering. They don’t make people move down the table as if
they need a new deodorant. We recruit talent from the same places as others. My
own view of the Park Ridge Center has been that given its mission, the people
who make it up don’t have to be believers in God or a particular God, they don’t
have to declare themselves. It’s like a religious studies department. The only
thing they have to do is be friendly to the venture. I’m chairing the board of a
liberal arts church-related college, St. Olaf in Minnesota, and through that
experience I got interested in a whole range of things. There are some places
where colleges like St. Olaf attract faculty who are a little embarrassed to be at a
church-related school. I always call them “the more secular-than-thou.” They feel
they have to show that they really aren’t religious. But you can go to Chapel Hill,
a secular state university. If you want to find the English department on Sunday
morning you’ll find many of them at the Chapel of the Cross. You won’t
necessarily find piety at every Catholic college because some feel they don’t dare let it show. Now, a little bit of that compensatory thing is alright. But, enough!

The main thing we look for is what I call friendliness to the mission, the recognition it’s all right to bring up these questions over here and to address them.

As with so many things, it’s in the area you have been overlooking where often fresh understandings are to be unlocked. I’m careful never to over-sell what Park Ridge does, but I think it is a place that is disclosive of meanings that you might miss otherwise.

Swazey: It certainly has a different mission statement and very different publications from “mainstream” bioethics.

Marty: Well, it should. Years ago a man named Clement Alexandre, the religion editor at MacMillan, taught me a lot. He wanted me to coedit a series called New Theology, for which each year he wanted me, with consulting, to pick fifteen articles that we thought were the cream of the year. First, I asked him, since the articles have all been published, what’s the big deal? He said, “Only people like you who are at a university and at a magazine will see all these things. Who else is going to know his or her way around 150 journals?” Alexandre’s dictum, which I use for any institution that I’m a part of, is this: If your product is manifestly different and has about it a character on the positive side that you can’t
keep people from, or on the negative side, that if they don’t have it it’s a threat to
their integrity and information, then you’ve got something going. He counseled
further: if you’re a pale version of what’s already there you won’t ever take off. I
don’t think the Park Ridge Center can look at the models that are out there and say
we are going to be just like them and then fulfill a mission.

An illustration from the magazine I helped edit for 44 years, the Christian
Century. Back in the 60’s and 70’s, when everyone in the religion business had to
be real “secular,” some talked about changing the magazine and not competing
with religious America and Commonweal and Commentary, but with The Nation
and New Republic and so on. But someone dug up an old story that the business
manager of our journal dreamed one night, that the founding editor was drowning
in Lake Michigan. The third time he bobbed up he hollered “Keep it religious,
keep it religious.” He did us a favor, because in secular competition it would have
died a long time ago. We would have been less left than a Nation and less funded
than a New Republic.

So I think you have to ask what hasn’t been around, what is the niche?
Asking is not done simply in a market sense. It isn’t that some entrepreneurs got
together and asked, “how can we sell something.” The Park Ridge Center really
came under the aegis and out of the auspices of a hospital system that saw a part
of it’s mandate to include this in our venture. Another Caldwellism: the CEO
once said, “Everyday I walk past the picture of nine Norwegian Deaconesses
standing in front of a little flat in Chicago that became their first hospital in 1900-
something. I always ask myself, if they had developed and matured with the
culture, and experienced what we have, would they approve of what we are now
doing?” I would quote Pope John XXIII’s words to Catholic religious orders:
“You should reform in the light of the intentions of your founders to whom you
cannot go back.” That was the theme.

Last year we had a reunion of the founding crowd of the Park Ridge
Center, at Marco Island. It was a last hurrrah, you might call it, or an “are we on
course?” kind of thing. Caldwell invited the man who had been Bishop of the
Lutheran Church body, which at that time was the “single-vote” owner of
Lutheran General, to be there. He told a story of how Caldwell had gone to him in
his Minneapolis office and said, “We are part of your body. If we were cut off
would anybody notice?” The man said, “probably not. It runs itself. Yes, we
have the one constituting vote, but we wouldn’t dream of exercising authority
over the hospital.” Caldwell said, “well, maybe it would be good for you if you
did care about it.” Right there was a sense that the churches or religious
institutions needed a lot of quickening, and that it can’t come through the regular
bioethic centers.

When you think of all the 450,000 congregations of all the religions in
America and probably twice that many ministers, you have a huge cadre of people
who are asked the questions that the ethicists get asked. I don’t think many of
them would congenially play professional philosophical ethical roles; only the bad
ones would. But they do stand at an important juncture between scriptures and
traditions and philosophies and law on the one hand, and immediate access to the
patient world on the other. The Park Ridge Center was designed to quicken the
congregations, and it always has some projects going on of an explicit
congregational character.

Swazey: You said a while ago that religion now has a much easier time getting its foot in
the door of medicine. Will it also get its foot in the door of bioethics again?

Marty: Yes, in a modified way. We have to ask what it means to get through the door
into the hospital, into the university, and into the media. I think we first have to
ask why one would have felt excluded, and then get to the other part of your
question. I think there are a number of reasons. You hear an awful a lot of
people, if they’re religious, who think there were “good old days.” Now they’re
mad at the Supreme Court. They’re mad at the liberals. They’re mad at whatever.
There are numerous books by Catholics and Calvinists and Lutherans and
Evangelicals on how colleges and universities gave their soul away by going
secular. Not all their visions are historically informed. There is more religion
around now than there was “back then.” One of the reasons for the muffling of
religious voices is our pluralisms. When there were perceived to be only
Protestant, Catholics, Jews in America. There were three big blocs. They didn’t
dare talk to each other. They didn’t dare offend anybody. So you didn’t say
much. Catholic hospitals had their ethics stipulated; probably so did Methodists,
Jews and so on, but that was it. A hospital near here once called Wesley printed a
list of a hundred or two hundred physicians on its staff. The place was started by
WASPs in a Protestant denomination. But there wasn’t a WASP name on the
staff list. Diversity is just taken for granted. Nobody even asks questions.

I spoke once about pluralism and ethics to the ethics people at a number of
hospitals in east-central Iowa. Somebody said, “Well, you are a Chicagoan, you
have all those black Muslims and people like that.” So I said, “Well, let’s just
play a game. Where is the oldest mosque in America? Here, where we are, Cedar
Rapids, Iowa, 1934. Right down the road is Transcendental Meditation
University, in Fairfield, Iowa.” Their turn: “Do you have gypsies?” “Well, I don’t
know.” “Well we do, and you don’t do anything gynecological unless the Queen
is there to authorize it. “Have you got Amish?” “Well,” I said, “Indiana has
them.” “We do here,” one said, “and all healing is communal. You don’t just
have surgery, you have six people with white masks in there with you.” By the
time we were done Iowans showed as much diversity as anywhere. That situation
has inspired curiosity and enlarged the palette of resources. There is today an
erosion of denominational boundaries, but the boundaries still show up. It shows
up in a huge way with Catholic hospitals at times of merger talk with non-
Catholics, and plenty of other places.

A second reason that there is more religion around is that other meaning systems gave out. The implosion of communism, socialisms, our outlasting of all the ideologies, the fascisms, the Naziisms. Then, closest to home, is the uncertainty about what Alasdair MacIntyre calls the Enlightenment Project in the West. I'm by the way not anti-Enlightenment. I'm an 18th century person on one side, and we wouldn't have most of the things if we weren't for it. I'm not knocking it, I'm just seeing its limits. These show up in arenas all the way from sophisticated post-modern relativisms to ordinary peoples' questioning the nature of secular rationality. In much ethical discussion people assume that only secular rationality should come into play. Of course, I don't want to write reason off from religion, but when you make these decisions religiously -- or humanistically -- you base them also on other things like memory, habit, intuition, tradition, community, affection, and hope. They are all there whenever people make decisions.

Members of bioethic panels are full human beings who include them too. What Park Ridge Center people want to do is to enlarge that range of options or to lay bare what is going implicitly all the time. Very rarely do you follow a patient through a whole course of care offering nothing but secular rationality.

Now, will that realization mean that bioethics automatically opens its door? No, we all have our habits, and for one thing the secular dimension by itself does carry me very far. What does that mean? In being a historian, I'm very
“secular.” I might write religious history and I might be a believer, but I can’t
assign a historiographic problem on Friday and come in Monday morning and say,
“You don’t have the answers, dummies? Well, there are documents to throw light
on this, but an angel came at three in the morning and told me the answer.” I’d be
a psychiatric problem, I wouldn’t be a historian. You don’t prove things by
needlessly multiplying entities. One can go an awful long way on “autonomy”
and “justice” and “nonmaleficence” and “beneficence.” But what I call the
thickening by religious meanings often is a contribution, assurance that we’re
actually addressing the patient, and often the patient as a member of a community.
Communities can be healing or killing agencies. Religion also can kill as well as
heal. Sometimes introducing religion into bioethics can be therapeutic. You can
get religious people not to kill, by which I don’t mean “kill kill,” I mean repress,
suppress, inhibit, be superstitious, prohibit inquiry, etc.
I can’t tell you how often, in the years I’ve been watching this, that people
assume certain things about specific religions that aren’t exhaustive. Then it is
liberating to find alternatives. Beginning with the old Karen Quinlan case, most
people assumed that Catholicism had one answer to the question of cessation of
treatment wrong. Her priest and her bishop, her ethicist and her family showed a
much more ample approach to the end-of-life. Judaism can be read many
different ways. When we were at the Brussels meeting pre-Cairo there were two
people from Egypt -- the head of the university and his medical ethicist were
there. They were reading the Qu’ran in such a way that it legitimated birth
control. You don’t have to dredge very deep. When the Cairo conference
happened one Muslim leader switched sides and lined up with the fundamentalists
and the Pope against birth control. Somebody asked why he did. That person’s
explanation was that he wanted to live. He was nervous about the fundamentalist
movements in Egypt. A lot of Muslims don’t know that the Qu’ran can be read
that way. Many Catholics don’t know the amplitude of Catholic ethics. As long
as they don’t know that, they are going to expect inhibitions that don’t belong
there. The American Philosophical Association was utterly given to Anglo-
American language thirty years ago. You couldn’t do existentialism, you couldn’t
do phenomenology. Then people like John Smith and friends at Yale got together.
Now a particularized Christian caucus is, I think, the largest caucus in the APA.
This doesn’t mean that the philosophers are going to the APA to save souls or be
acceptable to everybody. It just shows the extent to which there are communities
out there that would like a different set of questions to be raised, and the same
thing happens in bioethics.

Swazey: Carla, do you want to get into the broader area of religion in American society?

Messikomer: One slice we have been looking at is the ways in which ways religions or thinking
religiously does and doesn’t have a place in the policy or the polity.
Marty: It has a voice. Again, I see it dispersed in pluralism. We are a republic.

Article 6 of our Constitution says there will be no religious test for office. The First Amendment prevents Congress, and with "Incorporation" (of the fourteenth Amendment), states, from establishing a religion. Wherever religion has been established and has too much power it's been bad for society and for religion. I think religion should always be on the defensive or having to be tested or having to prove itself, never taken for granted. It gets corrupt if it has a free ride and it will be giving answers to questions that it has no special competence to give. I'm not interested in a clerocracy or hierarchracy or a theocracy.

Religion has its place among the other voices in a political order. When you use the words like polity or polis (the human city), Articles 10 and 51 of the Federalist Papers set things up very well: the security of the republic lies in the multiplicity of the elements, factions, sects that make it up. If some faith got 51% support I'd demand a recount.

We are healthier for the contention about the place of religion. Too much religion in the polity is dangerous. But what do we want?

You would have to start by saying, if it is true, that majorities of the American people would contend that their deepest ethical roots are in their faith. That they want to please God, or they are afraid of God, or they love God, or God tells them to love the neighbor and care for the neighbor. Whatever that grounding is, to suppress it artificially is dangerous.
James Madison had three main things to say about religion. One, you can’t establish it. Two, you can’t privilege it or forms of it. But three, you can’t use it to disable individuals or groups who rely on it to seek their way in the public sector. When someone says, “You’ve got to do this about gays because my Bible commands it, Madison would suggest: if you don’t like such an expression you can’t pass a law against it. What you do is get all the other people with other Bibles or different interpretations of Bibles and then together say, “No, that’s not the only way to look at it.” Thus Catholic anti-abortion voices have been somewhat more credible than Protestant ones, because of the natural law argument. Catholic bishops don’t say, “the Bible forbids abortion.” You’ve got to really twist the biblical text to say that. Some Protestants say that it is explicit on the subject. In response we can say, “well that’s nice, it’s your Bible. If you can get 51% or 67% of the people to agree then you win and we’ll sulk.” If a scripture is the main motor of ethics for someone or for a group, let it show over the long pull. It will be a revitalizing force in the culture as opposed to a deadening one, unless someone got too powerful -- then I would find allies to counter it.

What would religion look like to be in the polity? Most citizens certainly don’t want a political party devoted to religion. There is good reason to be very nervous about one of the parties being too far over that way now. There is no reason to be impressed when presidential candidates testify to their profound religious experience. I like to quote Mary McCarthy in paraphrase: “Religion
makes good people good and bad people bad.” We could judge much about a person just because she or he makes a claim. We should be interested in what it has to do with a candidate’s policy. Jimmy Carter said he was a Baptist and Baptists believe such and such about liberty. So he was going to be a human rights person. That may complicate foreign policy. It did. Yet we elected him. Ronald Reagan said he was a Bible believer and was going to enhance the Bible. So he called 1983 the year of the Bible. He had a perfect right to do that. He was a citizen. Then Congress was starting to second his motion with a law. We would have fought them in court because they have no right to. Reagan could have called it the year of the Qu’ran for all of that, it’s his right.

The testimony of religion, the gestures, the witnesses to it can be positive. Martin Luther King Jr. illustrates this well. Max Weber says with a text you can change the culture in either of two ways: You can say “it is written but I say unto you,” or you can say “it is written and I insist.” If you read King’s *Letters From a Birmingham Jail* and all his serious writings, you’ll see that figuratively in one pocket he treats sacraly the Declaration of Independence and the Constitution. The former specter of God given rights, the higher law is implied. King could say: “100% of you are supposed to be responsive.” In his other pocket King would take a particular text of Jesus, which over 80% of the American people would claim to line up with and say, “If you believe that, then you had better change. Thus: Let justice roll down like streams.” No citizens lost their liberties
because Martin Luther King Jr. was invoking the Declaration or Isaiah. He might
not have stayed with his cause if he weren't grounded in both. Of course, a good
citizen can be purely secular and ethical. I'm not throwing non-religion out.

In the polity of most universities the subject matter of religion had long
been overlooked, excluded, or treated marginally. Today it has a bigger place. It
is not huge location because it is part of the humanities and they are not huge. But
it's there. In the part of the polity called art and entertainment, art and
entertainment are partly out to shock so they will sometimes seize sacred symbols
and shock. On the other sides, too, where is the public? When they made the
movie Moses Prince of Egypt, the film-maker called in religion people all over the
place to consult. The producers said they were doing this because they were
theologians spreading the Bible's message. They were money makers, and did not
want to alienate anyone. In all these zones it's a matter in part of reading pulses
of people and often trying to criticize them where their religion or their outlook on
religion needs change.

The whole women's movement has been an illustration of this. Southern
Baptists still keep using a scriptural text to keep women down. In most other
church bodies women have reread the texts and found power in them that they
hadn't seen in them before. We are not going to get anywhere on the homosexual
issue without facing the religious side of the issue. Debate over it is constant
now. We didn't ask for it to be there, it's just there. Capital punishment is a
bigger issue than before. I love those issues where there is something credible
that might be said on both sides.

The most interesting theme now is “charitable choice” and “faith-based”
volunteering. Pew money funded an exploration at Temple University. It hosted
the American Jewish Committee on one side of the table and a couple of
Catholics, a couple of mainline Protestants, and some Baptist and Evangelicals on
the other. The Jews were unanimously critical of the experiment because they
know how huge majorities act. Catholics and Lutherans have done this for many
years. If you give to Catholic charities you do not become involved with the
church to nurture faith, so it’s uncontroversial. Mainline Protestants, to
everyone’s surprise, were more for it. Everyone thought it would be the
Evangelicals who would leap at charitable choice. But they and black churches
were divided. Half of them were saying “Isn’t this wonderful because it enhances
the care we can give, the good we can do.” The other half would say, “Don’t you
dare. If you get the king’s shekels you get the king’s shackles.” The delicate and
interesting thing to learn from all this is: most citizens demonstrably have no
problem with such ventures, and like them. I remember a few years ago when the
cover of the New York Times had an article on Cardinal O’Connor. He wouldn’t
hire gays. There were demonstrations against their policies. Somebody said,
“Well, what business is it of anybody? It’s the Church and it has its teaching for
O’Connor to follow.” Somebody else said, “Well, yes, but the Cardinal does
administer $70 million a year in tax funds.” I checked with the New York Times and learned that not one letter had come in from the ACLU, from People For The American Way, or from anybody. It is simply a given that Catholics have the most efficient distribution and they have their way figured out. But what do you do when -- a case study -- in Mississippi, maybe the best program for getting high school age kids, in this case mainly African American, off drugs, there is a black Baptist minister who gets these kids off drugs and it works. But it works by getting them to be born again, to come to Jesus, and a Jew is paying for that. In other words, when does faith-based become proselytization? That to me is the most creative place to debate these issues of the rule of religion in the polity. They are insolubles but they are addressibles.

Swazey: What do you think about how they are being addressed at a national level?

Marty: My biggest worry about faith-based -- and here my politics will show -- is that it often is a way of unloading the welfare thing and creating the impression that we can address it through churches. There is no way you could use resources of religion with little governmental incentive and cover what the nation needs. It’s stop gap, it’s regressive, or it’s focused. In disciplined ways it can do well. For example, the Lutheran Immigration and Relief Services probably has done as much as to settle South East Asian refugees as anybody. I was on a commission
in the Carter era and learned that they had a very good name for what they were
doing. The government didn’t have to do all this resettling; 100% of its actual
cost -- not the in-house cost, which the Lutheran Church pays for -- but the actual
task of flying somebody and moving them to Minnesota, or elsewhere based on
tax funds. The government wasn’t well set up for this. Such activity is even
uncontroversial. I don’t think anybody could be elected to Congress trying to
remove that kind of program.

A huge chunk of the Salvation Army’s budget is tax-funded. You
wouldn’t get elected to Congress if you said you are going to remove tax
exemption for churches, which would be a big violation of a “wall”, if there were
one, of separation of church and state. Similarly, you couldn’t get elected if you
said you’re not going to let any tax funds go to the AIDS program that the anti-
homosexual Cardinal is administering. Yet all this is something we have to
watch. The program does two things: It illustrates how far religion reaches in the
polity, often in disguised form, and it demonstrates how creative it can be when
asked questions about what the nature of that involvement should be.

Messikomer: I guess the final thing we wanted to address with you is the scope of bioethics
and the content of it. Is it focused solely on biomedicine, or do the questions that
are addressed within that framework speak to something larger than bioethics
itself about the American population, the social landscape?
Marty: Definitely the larger. A recent survey shows that by all the measurements used internationally, the U.S. is 37th from the top in providing health care. The biggest place where it falls down is on prevention. If we did better on that other counts would be better as well. So we must start by asking the question of the whole health of the culture. This questioning is driven down by the fact that one-fifth of America is underclass, or finds good care inaccessible, or has not the faintest hint of what prevention would look like. When you can sector out the various population elements and determine who dies youngest and so on, you have a little clue to our situation. Bioethicists have to ask questions of the nature of the polity itself, and about delivery of care. This is a way of seguing into the discussion of the fact that justice and access are a big part of the issue. The bioethics field will have to include justice in an Encyclopedia, but it usually gets quickened only when somebody is in institutional care. That’s when an ethic panel can rip into action. That’s when the Park Ridge Center or the Hasting Center notices it and so on. But we tend to turn over to sociologists and social critics the question of people who don’t get care at all and who don’t have insurance.

Project 10, which anteceded the Park Ridge Center, pursued ten topics such as care, cure, madness, passages, justice, suffering, etc. A couple of these themes may be beyond the scope of ethics, but dealing with suffering, for instance, has a bioethics dimension. What about dealing with pain? That comes up in bioethics panels because you’re dealing with it all the time. Attitudes
towards the body and pain in the larger culture is part of bioethics' scope. The biggest illustration of that growing scope would be the causes of women for the last fifty years: women's rights, understanding the meaning of the body, justice in care, terminology, etc. All of these things look like they belong to linguists, sociologists, politicians and the like. But all of them also relate to understanding of ethics in relation to biological entities. Not many bioethics forces are doing as much as we are going to need done on neurosciences. Far from brain surgery operations, and far from psychiatric clinics, the whole understanding of what the human is will determine in part how we are going to treat humans. The Pope runs around with Dignitatis Humanae. I won't agree with all of his applications, but everywhere he goes in the world he brings up dignity. Most places he goes bioethics as we conceive it, will not "kick in" because the arenas are not even in clinics. They are in peasant villages near Bogota and Manilla and Cape Town. Wherever bioethicists position themselves to take on the larger questions, the dignity and justice issues get treated.

The things that bioethicists talk about can be extended and have analogues in a larger range. If the culture starts connecting what's the kind of expertise bioethicists have with the larger question of the health of the civic culture the profession will grow, the speciality will properly grow, and the culture will grow. As far as the public knows bioethics exists to identify and deal with crisis situations.
My own observation of the field has been that more and more has been going into long-term care questions, hospice questions, and so on, and that’s good. Most of the dramatic cases in bioethics, too, are not representative of the quotidian. Most things that bioethics has to do with in our culture will be more of the kind of thing you have to universalize: who gets care, how do you distribute care, how do you assure care, what do you do to people under care, etc.?

Why have most people in bioethics avoided dealing with those issues for thirty-odd years?

Well, for one thing nobody pays for it. I don’t mean that cynically. I mean I can be a historian and have a nice life writing or reading history, but the university says come and teach it and then I have got that as my mission. I am going to teach the things that they want me to teach, and if I do other things incidentally that’s real nice. But hospices don’t have budgets for this.

Right, yet bioethicists have had jobs for twenty or thirty years, but in those jobs, in academia at least, they haven’t tackled those sorts of social justice issues.

It could be the same problem that you have with every profession. The papers read at the American Academy of Religion have little to do with the way the same
people teach when they are back at their schools. The way theologians write when they write their books has very little to do with what they themselves want to hear, or to hear when they are in a parish setting. It’s just the nature of the case that we are always refining our specialities in a certain way, and we get security from that. Simone Weil once said culture is professors training students to become professors to train students to become professors. They don’t always notice what all is out there. We constantly need shaking up. There are some people who feel that the new stringencies in respect to the bottom line in the HMO era might push bioethics into a broader role. I’m not an expert and I can’t say it’s happening, but I know people who would say that. You have to be forced into something new. So in sum: we all have disciplines and have canons and these have norms. I’m not a deconstructionist about discipline. They are not as neat as some people think they are, but there are some things in each one should know and each demands certain languages. Which is one of the reasons why I never describe myself as a bioethicist or an ethicist. I have a simple little rule in life: I always say, if the dozen or so people that I most admire in the discipline were in the front row would I be giving a lecture on that? I would give a lecture on pluralism in medical ethics, but I wouldn’t give a lecture on philosophical groundings of the ethical decisions. I make a distinction between the public intellectual and the public scholar. The public intellectual can be creative, can be entrepreneurial, can be a free floater. The public scholar is somebody who starts in a discipline, is
responsible to the discipline, checks out in the discipline.

END OF INTERVIEW