While comparisons of public relations practitioners and attorneys remain attractive among practitioners and scholars searching for evidence of public relation's emergence as a profession, practitioners would be better served by emulating physicians in their "healing" role rather than attorneys in their "advocacy" role. Public relations's use of the physician as metaphor must consider the healer as he supposedly and ideally performed his role in the past. Practicing a holistic and preventive type of medicine, such healers would have been given implicit license by their patients to provide virtually all types of advice about life and living. Such physicians might or might not be religious, but these healers would possess a "love" consistent with most people's religious beliefs. Although the concept of love is seldom discussed among public relations practitioners and scholars, love as a concept has utility in discussions of professional ethics and what constitutes "excellent" public relations. While love appears to have no place in the two-way asymmetrical model of public relations advocated by Edward Bernays, it is an essential component of James Grunig's model which demands symmetrical practice and a pro-active mandate for love. Dean Kruckeberg and Kenneth Starck's recommendation to restore and maintain the sense of community that has been lost in modern society lends itself well to the metaphor of the public relations practitioner as a "healing" (and "loving") physician. The ethics for such "excellent" practice remains simple: love. (RS)
"HIPPOCRATES AND BERNAYS:
A MEDICAL ETHICS PERSPECTIVE
ON THE ETHICS OF PUBLIC RELATIONS"

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Presented in the Program:

Public Relations

In The Role of Healer

7 to 8:20 p.m.
Thursday, Nov. 18, 1993
Monaco-N Tower-Level I

At the 79th Annual Meeting
of the Speech Communication Association

Fontainebleau Hilton Resort and Spa
Miami Beach, Florida
Thursday, Nov. 18, through Sunday, Nov. 21, 1993
"A MEDICAL ETHICS PERSPECTIVE
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The regimen I adopt shall be for the benefit of my patients according to my ability and judgment, and not for their hurt or for any wrong. I will give no deadly drug to any, though it be asked of me, nor will I counsel such, and especially I will not aid a woman to procure abortion. Whatsoever house I enter, there will I go for the benefit of the sick, refraining from all wrongdoing or corruption, and especially from any act of seduction of male or female, of bond or free. Whatsoever things I see or hear concerning the life of men, in my attendance on the sick or even apart therefrom, which ought not to be noised abroad, I will keep silence thereon, counting such things to be as sacred secrets.

Hippocrates: Physicians Oath1

INTRODUCTION
Interestingly, the Hippocratic Oath had not been written by Hippocrates, but was authored by a later cult of philosophers and physicians a whole generation after Hippocrates had died. Strong provisions against surgery, abortion and so forth are in accord with Pythagorean doctrine and are at variance with that of Hippocrates, at least according to Richards.2 He reflects upon this irony:

"...is it not odd that for thousands of years, hundreds of thousands of eager young physicians should have employed the first moment of their medical careers in swearing a mighty Oath, whereas the Father of Medicine himself never saw the Oath, never swore this Oath, and indeed, so far as the record goes, never swore at all? There are, of course, many excellent ethical precepts in the Oath; these also can be found, stated in brief and reasonable words, in the true writings of Hippocrates.3"

3Ibid.
PRACTITIONERS SHOULD ATTEMPT TO EMULATE A 'HEALING' ROLE
Common understanding of this item in the history of medical ethics may be flawed, and contemporary physicians and their political/economic establishment may be vulnerable to criticism. That notwithstanding, this paper argues that public relations practitioners should attempt to emulate a metaphorical "physicians' role" as "healers" within their organizations and in the society of which their organizations are a part. Too, such a role is in keeping with "excellent" public relations as defined by Grunig et. al. in their book, *Excellence in Public Relations and Communication Management*.

Thus, if there is to be a metaphor for the role of the public relations practitioner within her organization and in society, let it be that of the physician in his traditional and idealized role in holistically treating and otherwise assuring the welfare of his patients.

Relatedly, public relations practitioners should understand and appreciate "organic" theories of society and of their organizations' role within this society consistent with this "healing" metaphor.

PR PRACTITIONERS LIKEN THEMSELVES TO LAWYERS
Historically, the overwhelming temptation has been to parallel public relations practice to the practice of law and to liken public relations practitioners to attorneys. For years, tiresome and misleading analogies have been proffered comparing public relations practitioners' role in the court of public opinion to attorneys' legal function in the courtroom. Arguments typically stress the allegedly similar "advocacy" role of each.

Such misleading comparisons remain attractive among those practitioners and scholars diligently searching for prima facie evidence to support public relations' supposed emergence as a profession. However, it is argued here that--even in the furtherance of their acceptance as professionals--practitioners would be better served by emulating physicians in their "healing" role rather than attorneys in their "advocacy" role.

This recognizes that even a highly "professionalized" role of public relations advocacy analogous to that in the legal profession at best can only relegate the practice of public relations to a two-way asymmetric model; at worst, such advocacy damns public relations practice to the most primitive model of public relations, that of press agentry.5

THE METAPHOR SHOULD NOT BE THE PHYSICIAN OF TODAY

However, this "healer" metaphor should not be the medical specialist who may be encountered today; problems can result from such a parallel. Ashley and O'Rourke observe that the role of the professions in a changing society will also change, either for better or for worse:

In postindustrial society, the source of power will no longer be economic ownership (whether capitalist or socialist), but rather knowledge and its communication. Such power means a still greater role for the professions.... This knowledge can be used to bring about greater social conformism and dependency on the professionals, or it can be used to open the system to wider and more genuine social participation by all. In either case, the professions must be radically reconstructed.6

Rather, public relations' use of the physician as a metaphor must consider this healer as he supposedly and ideally had performed his role in the past. Indeed, the metaphor must be the physician of artist Norman Rockwell in his paintings of small-town American life of a bygone era; or perhaps of "Doc" in Gun Smoke, the television series about late 19th Century Kansas; or--to a lesser extent--even of the good doctor "Joel" in television's Northern Exposure, the popular situation comedy about a contemporary frontier community.


6Benedict M. Ashley and Kevin D. O'Rourke, Health Care Ethics: A Theological Analysis (St. Louis: The Catholic Health Association of the United States, 1982), 79.
What are our perceptions about the attributes of these healers--both as portrayed in the media and as we perceive them to have existed in real life--and why should our image of such physicians become a metaphor for contemporary public relations practitioners?

**PHYSICIANS CONVEYED WISDOM OTHERS WOULDN'T HAVE**

Invariably, at least according to our image, these physicians conveyed a good, but not perfect, professional knowledge and a good, but less-than-certain, ability to heal. However, what they lacked in medical knowledge and skills, they oftentimes could compensate for in common sense, instinct and perhaps a well-rewarded faith in a Higher Being and Divine Providence in all matters of life and death.

Thus, such healers needed to be artists as well as scientists in their practice of medicine; importantly, they would possess an essential humility resultant from their own appreciated lack of sufficient knowledge and abilities to be able to consistently heal and to maintain their patients' health.

**PHYSICIANS WOULD HAVE MANY FEMININE VALUES**

Stereotypically male, they nevertheless would have many values that scholars today would identify as feminine in nature. That is, they would be caring and kindly and nurturing, albeit in ways that would only somewhat delimit their patriarchal dignity.

They would not only be knowledgeable about medicine, but they also would be recognized within their communities as possessing basic and far-reaching wisdom. Practicing a type of medicine that today would be recognized as holistic and preventive, they would have been given implicit license by their patients to provide virtually all types of advice about life and living.

**THEIR INSIGHTS WOULD TRANSCEND MEDICAL PARAMETERS**

Too, their insights and advice frequently would transcend the normal parameters of medicine; indeed, these physicians' opinions would be respected by their communities about all matters of subjects extending far beyond their professional specialization of medicine.

And, either for good or for bad, such healers would be virtually omniscient (and perhaps amazingly tolerant and understanding) about both the private and the public lives of their patients.
Such physicians would live in the communities in which they practiced medicine, communities of which they were a vital part; therefore, they would be ready models to illustrate to children and to adults alike the rewards of virtue and hard work.

Together with lawyers and clergy, these physicians would be among the few professionals within their communities whose members otherwise would consist of a largely undifferentiated population.

**THEIR PATIENTS WOULD BE UNAWARE OF ANY MEDICAL ETHICS**
Most likely, their patients—who would comprise a goodly part, if not all, of their towns or of their neighborhoods within larger cities—would be completely unaware of any medical ethics to which these good doctors adhered; however, a basic and essential "goodness" would be expected of such healers, a goodness that would be evidenced in myriad ways to patients and to other townsfolk; conversely, any lack of "goodness" thereof assuredly would be judged harshly.

Such physicians might or might not be religious, but these healers would possess a "love" consistent with most people's religious beliefs and in keeping with what Barnette recommends for all physicians when she writes about medical ethics, observing (emphasis mine):

> Love in terms of the Golden Principle appears in the major religions and philosophies of the world. It is derived from agape-love from which all other ethical imperatives are derived in the Judeo-Christian tradition. Hence, this approach...is contextual principle-agapism in which justice, fair play, reciprocity, mutual trust, and so forth become instruments of love. Both religious and non-religious physicians will find love in this sense to be a valid ethical guideline in the practice of medicine. It is in keeping with much of the ethical teachings of the Hippocratic Oath. A primary promise in the Oath is that the physician will "do no harm" to the patient. The apostle Paul expresses it this way: *"Love hurts nobody"* (Romans 13:10, Phillips).7

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Whether such physicians ever existed—at least to this ideal—is suspect, but such reality is also by-and-large irrelevant. Collectively, enough of these attributes were shared by such "healers" to serve their patients and also their communities well. Assuredly, it is more than nostalgia that makes older people long for the bygone days of their "family doctors," despite the incredible clinical advances that provide today's excellent health care.

LOVE TYPIFIES THE COLLECTIVE ATTRIBUTES OF SUCH PHYSICIANS
It is the love that is referred to by Barnette that typifies and best describes the collective attributes inherent in the "healing" role of such physicians and which should interest public relations practitioners in their examination of this metaphor of the public relations practitioner as "physician". Too, it is this love upon which any discussion of ethics in public relations must center when using the metaphor of the physician as "healer".

LOVE IS A CONCEPT NOT FOUND FREQUENTLY IN THE LITERATURE
Love is a concept not found frequently in the public relations literature. Yet a barely discernible modifier in Excellence in Public Relations and Communication Management makes use of a derivative of that word. Grunig, in defense of an "excellent worldview" of public relations, argues (emphasis mine):

...(W)e can conclude that an excellent worldview for public relations will be one that is logical, coherent, unified, and orderly—the internal criteria. It also should be effective in solving organizational and human problems, as judged by relatively neutral research or by history—the external criterion. Finally, it should be ethical in that it helps organizations build caring—even loving—relationships with other individuals and groups they affect in a society or the world8

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THEORIES ARE NOT VALUE-FREE
Grunig observes that philosophers of science today realize that theories are not value-free and that they cannot exist independently of the basic "worldview" of the people who develop or hold them.9

Thus, the concept of "worldview" is critically important to Grunig's arguments about "excellent" public relations and also to the metaphor of the public relations practitioner as "physician" as well as to Grunig's description of "loving" relationships.

Grunig defines "worldview" thus:

Whatever the term used, philosophers of science generally have agreed that worldview functions as a type of theory at a level more abstract than the levels of theory and observation recognized by logical positivists. In their current thinking, philosophers describe worldview as a gestalt or mind-set that focuses the attention of a scientist primarily upon theories or observations that fit within that mind-set.10

LOVE AS A CONCEPT HAS GREAT UTILITY
Although the concept of love may be seldom discussed among public relations practitioners and scholars, love as a concept has great utility in the "worldview" that Grunig describes--particularly in the discussion of any professional ethics of public relations.

The metaphor of the physician in his role of "healer" provides an insight into what Grunig et. al. would consider "excellent" public relations practice. Compare the concept of "love" as an ethical component in "excellent" public relations to the connotative implications of "engineering" in Edward L. Bernays', The Engineering of Consent.11

9Ibid., 7.
10Ibid., 35.
A PRO-ACTIVE MANDATE FOR LOVE IS OBVIOUS
The former suggests a "worldview" that is far removed from the latter. "Excellent" public relations as defined by Grunig et. al. demands a symmetrical practice and one in which a pro-active mandate for love is obvious. Grunig argues:

An organization that uses the two-way symmetrical model...uses research and dialogue to manage conflict, improve understanding, and build relationships with publics. With the symmetrical model, both the organization and publics can be persuaded; both also may change their behavior.\(^1\)\(^2\)

SUCH A MODEL LENDS ITSELF MORE TO THE PHYSICIAN'S ROLE
Such a model lends itself far more to the physician's role as "healer" than to the attorney's role as "advocate," the latter being more in keeping with the two-way asymmetric model of public relations as exemplified by Bernays.

Grunig has argued that:

...(T)he asymmetrical worldview steers public relations practitioners toward actions that are unethical, socially irresponsible, and ineffective. ...(P)ractitioners with an asymmetrical worldview presuppose that the organization knows best and that publics benefit from "cooperating" with it. Asymmetrical practitioners with a social conscience...sometimes convince themselves that they are manipulating publics for the benefit of those publics.... (I)n spite of the good intentions of practitioners--it is difficult, if not impossible, to practice public relations in a way that is ethical and socially responsible using an asymmetrical model.\(^1\)\(^3\)


LOVE IS AN ESSENTIAL COMPONENT OF "EXCELLENT" PR
Thus, while love appears to have no place in the two-way asymmetric model of public relations, it is an essential component of "excellent" public relations practice. Love is likewise an obvious requisite in at least some of the social roles identified in "excellent" public relations. Grunig describes two of these social roles, i.e., the "idealistic" social role and the "critical" social role:

**Idealistic Social Role:** Public relations is a mechanism by which organizations and publics interact in a pluralistic system to manage their interdependence and conflict.14

**Critical Social Role:** Public relations or a communication system is part of a larger organizational or societal system. These systems are constructed; therefore they can be deconstructed and reconstructed. Public relations scholars and practitioners can and should criticize public relations for poor ethics, negative social consequences, or ineffectiveness; and they should suggest changes to resolve those problems.15

Thus, Grunig argues that public relations should be practiced to serve the public interest, to develop mutual understanding between organizations and their publics and to contribute to informed debate about issues in society. Too, in its "critical social role," public relations can be constantly improved both as a profession and as a societal function.16

"EXCELLENT" PR IS IN KEEPING WITH KRUCKEBERG AND STARCK
Such "excellent" public relations is in keeping with the recommendations of Kruckeberg and Starck concerning the role of the public relations practitioner both within her organization and in society.

Seeing public relations as primarily community building, they argue:

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15Ibid., 10.
16Ibid., 9-10.
The public relations practitioner's role as a communicator, and more specifically as a communication facilitator, should be his or her highest calling. Being a facilitator of communication in the traditional sense—that is, seeking out and promoting discourse along all avenues—is a role of critical importance today, which can help to build a sense of community among organizations and their geographic publics.\(^7\)

**KRUCKEBERG AND STARCK'S RECOMMENDATION LEADS ITSELF WELL**

Kruckeberg and Starck's recommendation to restore and maintain the sense of community that has been lost in modern society lends itself well to the metaphor of the public relations practitioner as a "healing" (and "loving") physician.

The feminine values of the physician alluded to earlier likewise address well Grunig and White's argument that such values are needed in public relations, noting that women are more concerned than are men about relationships, responsibility and equity. Indeed, women's preference for nurturance and relationships may be what is needed by managers in the future, they argue.

Grunig and White conclude:

The feminine worldview seems to be a symmetrical worldview and the masculine worldview an asymmetrical one. Thus, a female majority in public relations could move the field toward excellence as the symmetrical worldview of most women begins to replace the more asymmetrical worldview of most men.\(^8\)

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Too, Grunig presents evidence organizations will be excellent more often in societies whose cultures emphasize collaboration, participation, trust and mutual responsibility. Such cultures could be regarded as "loving" and in keeping with the types of communities identified with the metaphorical "physician".

Thus, Barnette could be writing for public relations practitioners as well as for physicians when she declares love to be a valid ethical guideline in the practice of medicine. The role of the attorney as "advocate" is inappropriate for public relations; also, ethics for such a two-way asymmetric role need be complex, reactive and with harsh sanctions.

Conversely, the role of the physician as "healer" provides an ideal metaphor for "excellent" public relations, and the ethics for such "excellent" practice remain exceedingly simple: love.