Dramatic Changes in the Health Care Professions Over the Past Forty Years

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Commentary on "Medicine’s Niche Among the Professions"

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The TARGET article by Norbert Goldfield provides a deft review of changes in the health care professions over the past 40 years. In this complementary note, I place medicine within the broader panoply of professions and suggest some of the changes that we can expect in the next decades. I conclude with some thoughts on what it means to be a professional.

While medicine properly lays claim to being the first profession, as well as the prototypical profession, its course over time bears similarities to that of several other professions. In one form or another, the major professions—medicine, law, education, engineering, the military, the priesthood—have existed for centuries, if not millennia. But until recent centuries, their course of training was informal and their practices were little regulated. Only within the last century or so has it been possible to stipulate the major characteristics of these professions: a prescribed course of study in an approved institution, typically a university; a clear set of requirements that need to be fulfilled prior to induction; a regulated apprenticeship; formal licensure; and, crucially, at least in principle, the possibility of losing one’s accreditation if one does not live up to the principles of the profession. Less formally, we look to members across the professional terrain to make complex decisions under conditions of uncertainty; to confer with knowledgeable peers and handle ethical dilemmas thoughtfully and reflectively; and, especially as the professional gains seniority, to look out for the long-term welfare of the profession. Often, these traditional professions have had as well a less attractive side: for example—favoring certain demographic groups over others, maintaining undue secrecy about procedures.

In recent years, due in part to the greater democratization of society, in part to the advent and widespread use of social media, most of these criteria have come under scrutiny. In democratic societies, artificial barriers to entry have been largely removed. Requisite knowledge is far more readily available, even to nonspecialists. Routes to certification are multiple and growing. Many more trades and crafts are stylizing themselves and dubbing themselves “professions”—whether or not they have any warrant for doing so. And as pointed out by Richard and Daniel Susskind in The Future of the Professions, many of the routine tasks of professionals are now carried out expertly, and at much less cost, by computer programs, algorithms, and robots—often without any human interface.

Looking ahead I foresee a much more variegated professional landscape. At the “top” of each of the learned professions, there will remain a cadre of human experts, whose knowledge and skills will be widely known, appreciated, sought after, and amply compensated—a so-called “star system.”
And there will remain a division between the traditional professions—named above—and so-called "fly-by-night" professions, which will continue to proliferate.

Other than that, however, I expect there to be a continuing and sometimes confusing churning. Professions will proliferate, the routes to professionalization will be varied, and the lines between professionals, para-professionals, and technological aides will increasingly blur—much more of a bouillabaisse than a consommé or a salad.

What will remain—and will be more important than ever—is the model, the ideal type of what it means to be a professional and to behave in a professional manner. Even today, indeed even yesterday, there are individuals who have accumulated many degrees who fail to behave in a professional manner (indeed, in politics, so much so that we no longer think of politicians as professionals). And equally, there are lay individuals—persons who neither have nor seek professional degrees—who carry out their work in an impressive manner.

I hope that going forward, we will value those individuals who are well trained; who keep up with the latest findings and "best practices"; who attend to the interests of others while maintaining their own integrity; who are able to reflect on difficult matters; consider various alternatives; strive to do the right thing under the circumstances; and, when they fail, as we all invariably do, seek to learn from their failures and to do a better job the next time. Finally, and, as with the professional of days gone by, we need leaders who concern themselves with the training of the next generation so that its members not only possess the technical skills but also embody the personal and ethical values of a professional.

I hope that we will always live at a time and under circumstances when we can say, of a person "He (or she) is a true professional"—and of a series of actions—"that was done in a professional way." And since medicine merits its position as the flagship profession, I hope, I trust, it will remain the prototype of professional behavior and a professional stance.