

# Distributors of Justice: An Essential Quality of Catholic Health Care Leaders

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Twenty-three years ago, my mother died of cancer at the age of sixty-eight. Although it was a good death and a profound experience, it was also a very vulnerable and fragile time for our family. There were two institutions that supported and guided my father and siblings as we coped with the loss of my mother: our parish church with its pastor, and the local Catholic hospital. While there were several people from the hospital who assisted us through this difficult time, Ruby, a hospice nurse aide, stood out with great force.

Ruby cared for my mother during the final month of her life in our home. She was an African American Baptist woman who brought a tremendous amount of joy and consolation to my mother, a traditional Irish Catholic from County Offlay, Ireland.

Ruby came in three days a week to care for my mother, bathing her, changing the bed, massaging her ailing body, and lifting her spirits. She was a natural, both in terms of how she physically touched my mother and how she

spiritually engaged her on her impending death. We would hear them laughing together, sharing stories of their children and talking about the Lord in their lives. Ecumenism was alive and well in that room. They would not have made much progress on doctrinal unity, but still, they witnessed a profound spiritual union.

Ruby's work was a great gift to our family, but there was a problem. She was not well-paid. As a nurse's aide for hospice work, she was one of the lowest paid people in the health care industry. They say wages are like shoes: if they are too small, they gall and pinch us, but if they are too large they cause us to stumble and trip. As a single mother with a couple of children, life was not easy for Ruby. Her wages, despite her good work, were galling and pinching.

Ruby was paid according to market value but not according to justice. Many businesspeople and market economists cringe at such a statement. They say that the buying and selling of labor is the same as the buying and selling of any other commodity such as soybeans — its price is determined by the interaction of supply and demand. If Ruby wanted to change her situation and get better pay, she should get the requisite skills and go into another profession.

In part, the economists are right. Ruby — like anyone who works within a market system

— is subject to the forces of the market. For the most part, customers will only pay for the instrumental value of work, that is, they will not pay more than the value they receive for the products and services bought. If the hospital decided to pay Ruby and all the lowest-paid employees higher wages, it would most likely price itself out of the market.

Yet Ruby is one of millions of examples, showing us that markets cannot exhaust our understanding of how we pay people. A market produces a wage, but it cannot ensure the status of the wage's moral worth. Wages, like most things in life, can be either excessive or defective. A labor market that fails to value the physical and spiritual care of the dying enough to give its workers a living wage is defective, just as a labor market that values someone who can hit a little ball with a stick at millions of dollars is excessive.

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The challenge is knowing how to respond to such excesses and defects. A wage that fails to meet the needs of a full-time adult employee will struggle to carry the weight of a real relationship between employee and employer. Yet to simply raise wages without implementing other changes would be self-defeating. Organizations can find themselves

at a competitive disadvantage if the labor costs are significantly higher than those of their competitors.

The last time I saw Ruby was at my mother's funeral. She was like an angel — a messenger from God — whose work offered consolation amidst the profound loss of our mother. There are millions of Rubys in the workforce today. Their labor meets the needs of others, but it does not provide for their own needs. Addressing the situations of the Rubys of the world is a multifaceted problem, but from a business perspective, a key factor is that the pay Ruby receives is dependent upon the wealth generated by the organization.

It is not easy to pay just wages to people like Ruby, who are considered low-skilled, but the logic of exchange used by managers and economists is too mechanical, too neat, and, frankly, too simplistic to deal with a case such as hers. One of the key insights of the Catholic social tradition is that a just wage is a "relationship," which is why the logic of exchange can't capture the richness of what it means to be just in terms of a wage. The very meaning of justice comes from the Latin root of justice that is *ius*, meaning "right," and in particular, "right relationships." In the Old Testament the Hebrew words *mišpāt* (justice) and *šedāqâ* (righteousness) describe the fulfillment of responsibilities between employer and employee, ruler and subjects, God and His people, husband and wife, parent and child.

*So what does this mean for Ruby?* First, and it may sound harsh, but as wonderful as Ruby is in her work and as a person, she has not developed the skills necessary to get better pay. Her education was poor. She comes from

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a broken family, and as a single parent, her household is simply under-resourced — she has few familial resources to draw upon when things don't go well. All of these conditions have reduced Ruby's wealth-creating capabilities. None of these conditions were caused by her employer, and for the most part Ruby did not create her cultural context.

Yet, even though the hospital is not responsible for Ruby's lack of skills and poor education, it is responsible for the nature of its relationship with Ruby. And though Ruby is not fully responsible for her situation, she has a job where she can influence the future. This brings us to our second point. When an employer receives work from an employee, both participate not only in an economic exchange but also in a personal relationship. This relationship, if it is to be just, has three convictions that should guide a just wage: *need*, *contribution*, and *order*.

- *Need*: For a relationship to flourish in organization, an employer must recognize that associates, by their labor, “surrender” their time and energy and

cannot use them for other purposes. A living wage, then, is the minimum amount due to every independent wage earner by the mere fact that he or she is a human being with a life to maintain and a family to support. A wage that fails to meet the needs of an associate (in particular, a full-time adult) is a wage that will struggle to carry the weight of a real relationship.

- *Contribution*: While the principle of need is necessary for determining a just wage, it is insufficient on its own, since it only accounts for the consumptive needs of associates and does not factor in their productive contributions to the organization. Because of effort and sacrifice as well as skill, education, experience, scarcity of talent, and decision-making ability, some associates contribute more to the organization than others, and are therefore due more pay. An equitable wage, then, is the contribution of an associate's productivity and effort within the context of the existing amount of profits and resources of the organization.
- *Order*: Pay is not only income for the worker; it is also a cost to the employer, a cost that impacts significantly the economic order of the organization. Without proper evaluation of the way a living and equitable wage will affect the economic order of an organization, the notion of a just wage becomes no more than a high-sounding moralistic impracticality. A sustainable wage, then, is the organization's ability to pay wages that are sustainable for the economic health of the organization as a whole.

## The key to resolving the tension is invoking the principle of contribution.

In Ruby's case, a tension exists between the principle of need and the principle of order. Raising Ruby's wages could put the economic sustainability of the hospital at risk. The key to resolving the tension is invoking the principle of contribution. Three conditions of relationship are necessary to come to a fruitful resolution.

First, hospital administrators in this case must resist the common practice of passively delegating their responsibilities simply to the mechanical force of labor markets. As managers, they are moral agents, *distributors of justice*, and not mere market technicians.

Second, Ruby has to take responsibility for the fact that she does not have the skills to warrant enough wealth to pay her a living wage. Whatever the circumstances that got her there, she is the one who needs to enhance her skill level. The hospital, however, has to play a role in partnering with Ruby to create development plans that can make her a more valuable member of the organization.

Third, hospital administrators should realize that every action has a reaction, and that raising wage levels without changing the work process would have serious consequences on overall cost structure. To simply pour surplus margins into wages without any consideration as to how

the performance of the organization might be strengthened would undermine the hospital's ability to pay sustainable living wages.

What should become clear to the hospital administration is that low wages are merely a symptom of a much larger problem of how the organization structures the work itself. When work is designed to use a wage rate below a living wage, it is difficult to pay a person like Ruby anything more than what she is receiving now, regardless of her talents. Prudence dictates that the living wage cannot come about automatically. It has to come through redesigning the work and giving associates skills. If administrators are going to raise labor rates to pay a living wage, they need to find ways to reduce their labor costs.

My family as well as so many families have been blessed by the Rubys of the world who have profoundly personalized Catholic health care's mission on hospice care. These Rubys meet the spiritual, emotional and physical needs of the dying every day. May Catholic health care leaders find just and prudent ways to pay them and meet their needs. ✚

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