

# A Positive View Of Lobbying

BY LEONARD J. WEBER, PhD

A recent listing of health policy bills before the current session of the Michigan legislature included more than 80 potential laws. At federal, state, and local levels, many policy decisions made by elected and appointed officials affect healthcare. Therefore, a challenge healthcare managers face is how to influence public policy.

Healthcare managers know that some changes in public policy promote appropriate and effective healthcare and some do not. They also know that it is not responsible to stand back, let others set policies, and *then* react. Although the term "lobbying" may suggest behaviors that are somewhat questionable from an ethical point of view, when done with the goal of improving the common good, lobbying is often the appropriate thing to do. Indeed, when done with the intention of benefiting those they serve, lobbying is healthcare managers' *responsibility*.

## LOBBYING'S NEGATIVE REPUTATION

Lobbying has acquired a questionable reputation among ethically sensitive persons for two reasons:

- The methods sometimes used in trying to influence legislation corrupt the legislative system by providing personal advantages to policymakers.

- Lobbyists often appear to be less interested in good policy than in protecting their own interests.

Philosopher Mark Sagoff often makes a distinction between our role as consumers and our role as citizens. When we act as consumers, according to Sagoff, we seek to acquire what we want for ourselves: Each follows his or her own concept of the good life, his or her own self-interest. When we act as citizens, on the other hand, we seek to achieve what is right or best for the community; we try to promote the good society.

The problem with much of lobbying is that personal or institutional self-interest is placed above concern for the public good. The very way in which most political commentators describe



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"special interest" groups indicates that they see these groups as having a more fundamental commitment to their own self-interest than to working with others for the good of all.

## LOBBYING AS ADVOCACY

In contrast to this view, another way of thinking about lobbying is as advocacy—an effort to influence public policy for the benefit of those who are not recognized by the powers that be. Although those who seek greater protection from increased environmental degradation or more low-income housing for homeless persons are examples of special interests, their advocacy is a different kind of lobbying from that which seeks simply a better deal for oneself or one's organization. Self-interest (in the sense of what one wants for self) is legitimate in many circumstances, but it is not ordinarily an adequate basis on which to determine good public policy.

Healthcare managers' responsibility to work for a just and effective healthcare system, and not just for the bottom-line interests of their own organizations, is recognized in the Code of Ethics of the American College of Healthcare Executives. According to the preamble of the code (as amended in 1992):

The fundamental objectives of the healthcare management profession are to enhance overall quality of life, dignity and well-being of every individual needing healthcare services; and to create a more equitable, accessible, effective and efficient healthcare system.

This code of ethics is similar to the goals of the sponsors of Catholic healthcare and to the mission of not-for-profit healthcare organizations. It is not enough to have an effective organization that meets the needs of persons who seek care; providers also have a fundamental commitment to working for a just healthcare system.

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hypertension, diabetes, and heart disease, as well as other issues such as emotional problems, grief, and living arrangement decisions.

Wherever a need has been identified—in the parish (by the parish nurse, the pastor, a minister of care, or a neighbor) or in the hospital (by a chaplain, a social worker, a home health staff person, an outpatient counselor, a volunteer, a physician, or the parish nurse director)—persons are coming together to provide resources and continuity of care. In an era of complex healthcare challenges and limited resources, those involved in RHCC's partnerships with parishes are experiencing the value of a collaborative, holistic healthcare delivery model, and in the process their faith is being strengthened.

Plans for RHCC's Parish Nurse Program include the following:

- To strengthen the quality of existing partnerships through education and evaluation
- To clarify healthcare needs through parish nurses' statistical and narrative interaction documentation
- To explore additional creative models and funding for furthering community outreach
- To increase access to healthcare services
- To expand ecumenically

Through parish nurses listening, teaching, and proclaiming the good news, God is indeed revealed. □

*To receive sample copies of RHCC's program brochure and description, job descriptions, letter of agreement, orientation process, commissioning service, budget, standards, statistical documentation, and evaluation process, call Lois J. Coldewey, RN, 312-794-8480.*

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### GOOD CITIZENS, GOOD LOBBYISTS

It seems essential, therefore, that healthcare managers support and promote lobbying. In addition, they need to review frequently the goals and objectives of lobbying efforts to ensure that they remain focused on creating "a more equitable, accessible, effective and efficient healthcare system." Given the nature of so much of the lobbying that takes place in our political system, it is important for healthcare managers to guard against the tendency to focus almost exclusively on the institution's more immediate and narrowly defined goals. Good lobbying is citizen behavior, not consumer behavior.

### LOBBYING METHODS

A third dimension to the ethics of lobbying is *how* it is done.

Public officials are obligated to put the public interest first. The Government Ethics Center of the Josephson Institute puts it this way:

Public servants should treat their office as a public trust, only using the powers and resources of public office to advance public interests, and not to attain personal benefits or pursue any other private interest incompatible with the public good. (*Preserving the Public Trust: Principles of Public Service Ethics*, Marina del Rey, CA, 1990)

The responsibility of those trying to influence public policy is, therefore, to interact with public officials in such a

way that they do not ask or tempt those officials to put private interests above the public good.

Conflict-of-interest analysis is an important tool that identifies public officials' ethical responsibility. I believe conflict-of-interest analysis could be equally important in identifying ethically unacceptable lobbying techniques and strategies that encourage public officials to put private interest above the public good.

Healthcare managers must pay careful attention to the methods of lobbying their organizations use. What message is sent when a healthcare political action committee contributes to the campaign of a particular legislator? What are the implications of hiring a professional lobbyist to represent the organization?

A healthcare manager should not assume that professional lobbyists have the same ethical commitments that he or she does. Unless healthcare managers make an explicit effort to know and monitor the methods of the lobbyists they hire, they cannot assume that those methods will always be appropriate.

### LOBBYING'S GOOD IS WIDESPREAD

Lobbying can be an activity in which ethically sensitive persons take pride. Advocating effectively and with political integrity for public policies that contribute to a more just healthcare system is fulfilling a professional responsibility, achieving an institutional goal, and performing a major public service. □