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Consumer Education in the Human Services
The Professional Service Business

by John McKnight

The business of modernized societies is service. We recognize this fact in our language. We now speak of educational products, health consumers, and a legal industry. There are psychological inputs and family outputs. Sophisticated economists define clients as markets.

We also recognize the service business by what we count. There are units served and units of service. And of ultimate importance, there is the percentage of the gross national (or world) product that can be counted as services delivered.

Every modernized society, socialist or capitalist, is marked by a growing percentage of its gross national product that is counted as a service. This tertiary stage of economic development is distinguished by its unlimited potential. Service production is presumed to have none of the limits imposed by goods production—limits such as natural resources, capital, and land. Therefore, the service business has endless horizons for expansion because there seems to be no end to the needs for which we can manufacture a service.

Modernized nations might therefore be best defined as service economies. Socially, they are serviced societies. Individually, they are peopled with service producers and service consumers—professionals and clients.

The politics of serviced societies are gradually being clarified. On the one hand, public budgets are becoming strained under the service load. Many national and local governments find themselves involved in the unprecedented politics of deciding between competing services: should we give more to education and less to medicine? Within the service sectors there are equally difficult dilemmas: should we cut back on tax-paid abortions or should it be flu vaccine?

THE APOLITICAL IDEOLOGY OF SERVICE
On the other hand, these dilemmas are often overcome by the apolitical ideology of service. Old-fashioned politics, rooted in a goods economy, allowed a civic debate on whether a nation needed more wheat or more steel, more automobiles or more houses. The new service politics is a debate as to whether we should have more doctors or more teachers, more lawyers or more social workers. This translates into whether we should trade health for learning, or justice for family well-being. These choices create an impossible politics in traditional terms.

While it is traditionally possible to decide between wheat and steel, it seems politically impossible to decide between health and education because health and education are not choices; they are services. Indeed, services are so immune to political debate that many governments resolve the dilemma by deciding that we will have less wheat and more education, less steel and more medicine.

This is not to suggest that these choices are correct or incorrect, or even to define the appropriate choices. Rather, it is to say that the apolitical nature of service is so pervasive that it is difficult for the public and policy makers to recognize that services are the central political issue in many modernized economies.

The political immunity of the services is best understood in terms of the symbolic referent of service. Services are something one pays for. The "good" that is paid for is care. Care is an act that is an expression of love. We say, "I care for her more than anyone" or "I am taking care of my mother and father." To love is to care. Care for pay is a service. Reversing the order, service is to care, which is to love. Love is the universal, apolitical value. Therefore, the apolitical nature of service relates to its association with the unlimited universality of love. Ask any service what is ultimately satisfying about his or her work and the answer will most commonly be framed in terms of wanting to care for and help people. Press on and the answer is usually that the individual "loves people."

Since love is not a political issue, care is not a policy question, and service becomes the one business that is an unlimited, unquestionable, and
cannot distinguish the mask from
their own face.

The service ideology is not hypo-
critical. Hypocrisy is the false pre-
tense of a desirable goal. The modern-
ized servicer believes in his/her care
and love, perhaps more than even the
serviced. The mask is the face.

The service ideology is not con-
spiratorial. A conspiracy is a group
decision to create an exploitative re-
result. The modernized servicer hon-
estly joins his/her fellows to create a
supposedly beneficial result. The
masks are the faces.

In order to distinguish the mask and
the face it is necessary to consider
another abstraction: need. We say
love is a need. Care is a need. Service
is a need. Servicers meet needs.
People are collections of needs. Soci-
ety has needs. The economy should
be organized to meet needs.

If a need is a lack of something, to
distinguish the mask from the face of
service, we should ask what is lack-
ing? Some respond that we lack
enough doctors, teachers, lawyers,
social workers, and psychiatrists.
Others say that we lack enough
health, knowledge, justice, social
and mental well-being. But in a mod-
ernized society where the major busi-
ness is service, the realistic political
answer is that we mainly lack an
adequate income for professional ser-
vicers and the economic growth they
porthand.

The masks of love and care obscure
the critical political issues of moder-
nized societies: the necessity to man-
facture needs in order to rationalize
a service economy. Thus, Medicare,
Educare, Judicare, Socialcare, and
Psychocare can be understood as sys-
tems to meet the needs of servicers
and the economies they support.

Removing the mask of love shows
us the face of servicers who need
income, and an economic system that
needs growth. Within this
framework, the client is less a person
in need than a person who is needed.
In business terms, the client is less the
consumer than the raw material for
the servicing system. In management
terms, the client becomes both the
output and the input. His/her essen-
tial function is to meet the needs of
servicers, the servicing system, and
the national economy. The central
political issue becomes the servicers’
capacity to manufacture needs in
order to expand the economy of the
servicing system.

If this analysis is correct, pejora-
tives are inappropriate. After all, a
serviced society does provide an
money, a structure for social or-
ganization, and workers motivated by
the ethical values of care and love. If
these are legitimate needs, clients can
be viewed as needed, rather than in
need, and we can get on with the
business of growing, developing,
creating, researching, and manufac-
turing services without the necessity
to project professional need upon
citizens. We can deal in political and
economic terms with the needs of
servicers freed of the apolitical mask
of love.

DISABLING EFFECTS OF
SERVICE
The problem with this political reso-
lution is political reality. Throughout
modernized societies a troublesome
question is being raised by the
citizenry. In popular terms it is: Why
are we putting so much of our re-
ources into medicine while our
health is not improving? Why are we
putting so much into education when
our children seem to be learning less?
Why are we putting so much more into
criminal justice systems when the
society seems less just and less se-
cure? Why are we putting so much
more into mental health systems and
yet seem to have more mental illness?

As if these popular questions were
not troubling enough, a new group of service system critics is asking whether we are putting more resources in and getting out the very opposite of what the system is designed to do. This question is most clearly defined as iatrogenesis: doctor-created disease. The new critics’ question is not whether we get less service for more resources. Rather, it is whether we get the reverse of what the service system is supposed to produce.

The new question is whether we get more sickness from more medicine. Do we get more injustice and crime with more lawyers and police? Do we get more ignorance with more teachers and schools? Do we get more family collapse with more social workers? These questions are most threatening to the previously apolitical service systems because, while services defined as embodiments of care and love are a political platform, while services that are understood as being less effective than they have been in the past are a political possibility, while it is even politically feasible to remove the mask of love and recognize services as systems in need of resources in order that economies may grow, it is politically impossible to maintain a service economy if the populace perceives that the service system hurts more than it helps; that professional service can become disabling help.

In the last few years the progressive leaders of the service business have recognized the iatrogenic threat. They are beginning to develop new strategies to deal with the counterproductive of service systems. Their basic response has been to call
upon another profession, the managers. The assumption is that while professional servicers are unable to control their iatrogenesis, the managerial profession can become the modern reformer, controlling and directing the systems so that counterproductivity is neutralized and the political support for the growth of the service system is protected.

The new service manager, translating his/her management skills from the goods production sector, sees four elements to be manipulated in rationalizing the service system: budgets, personnel, organizational structure, and technology. Therefore, the service manager is now busy at work instituting cost-control systems, developing personnel training systems, restructuring delivery systems, and introducing new technologies. The most progressive have used their advanced marketing skills to develop a fifth manipulation, preparing the client. They recognize that if there is no need for service, it is possible to manufacture a need. If the popular perceptions of need don’t fit the service, modern managers have techniques that can persuade people to fit the service through advanced marketing techniques.

Will these professional management techniques stabilize the service business by limiting iatrogenic effects?

The capacities of modern management systems are impressive. Combined with the apolitical ideology of the services, one might well predict a collaboration that is an irresistible force directing the policies of modernized economies. Yet, an alternative view suggests that there may be a counterbalance—indeed, an insurmountable obstacle—facing the irresistible force. If such an obstacle exists, it is the product of the inherent limits of well-managed services.

The remainder of this paper is an attempt to identify the intrinsically disabling effects of modernized service relationships and to assess the political consequence of their growth. The disabling characteristics of professionalized service grow from a set of assumptions regarding the nature of need. From these assumptions flow a set of premises regarding the appropriate remedies.

ASSUMPTIONS ABOUT NEED
Looking at the professionalized assumptions of need, three elements are central to the disabling effects.

From Needs to Deficiencies
First is the translation of a need into a deficiency. A need could be understood as a condition, a want, a right, an obligation of another, an illusion, or an unsolvable problem. Professional practice consistently defines a need as an unfortunate absence or emptiness in another. One is reminded of the riddle asking someone to describe a glass that has water in its lower half. Is it half-full or half-empty? The basic function of modernized professionalism is to legitimize human beings whose capacity is to see their neighbor as half-empty. Professionalized training is now a magnificently complex system for labeling that perceived emptiness. Professionalized research increasingly devotes its efforts to extending the upper rim of the glass to insure that it will never be filled, even by the results of what is considered to be effective service.

In a servicing economy where the majority of people derive their income from professionalized helping, nations need an increased supply of personal deficiency. Thus, a society that purports to meet need which is defined as personal deficiency is more accurately understood as an economy in need of need. The comic distortion could be societies of neighbors whose income depends upon finding the deficiency in each other. The consequence is neighbors unable to act as communities of competence with the capacity to perceive or act upon solvable problems.

Individualization
The second disabling characteristic of professionalized definitions of need is the practice of placing the perceived deficiency in the client. While most modernized professionals will agree that individual problems develop in a sociopolitical context, their common remedial practice isolates the individual from the context. The effect of this individualization leads professionals to distort their own contextual understanding. Because their remedial tools and techniques are usually limited to individualized interaction, the interpretation of the need necessarily becomes individualized. The tool defines the problem rather than the problem defining the tool.

A recent study of children who became state wards exemplifies the process. The children were legally separated from their families because
the parents were judged to be unable to provide adequate care for the children. Therefore, the children were placed in professional service institutions. Nonetheless, the professional case records universally portray the child as the problem.

On the other hand, the officials who were involved in removing the children from their homes agreed that the most common reason for removal was the economic poverty of the family. Nonetheless, they had no resources to deal with poverty. There were, however, many resources for professionalized institutional service. The service system met its economic need by institutionalizing an individualized definition of the problem. The negative side effect could be defined as families whose poverty was intensified by the resources consumed by the “caring” professional services. In iatrogenic terms, the servicing system produced broken families.

The individualizing, therapeutic definition of need has met a countering force in some of the liberation movements. The civil rights and women’s liberation movements are cases in point. Their essential ideological function is to persuade minorities and women that they are human beings who are neither deficient nor dependent upon systems purporting to meet their needs through individualized professional help. Instead, these movements use collective action to overcome the individualized, deficiency-oriented consciousness communicated by the professional service ideology.

**Atomization**

The third disabling imperative of professionalized definitions of need results from specialization—the major product of advanced systems of technique and technology. We all know that highly specialized, intricately organized service systems provide magnificent organizational problems for managers. Incredible human and financial resources are now devoted to the rationalization of these systems, providing politically acceptable problems that justify economic growth through the service sector.

What is less clearly understood is that these systems impose their mirror image on the citizenry. As the systems are a set of managed parts, so the client is necessarily understood and processed as a set of manageable parts, each with its own service mechanic. These complex service systems remind me of those placemats in some restaurants which show a cow divided into its edible parts: the steak, the roast, the ribs, the tongue, and so on.

In like manner, professionalized service definitions increasingly communicate need in terms of people as atomized parts. Not only do we need podiatrists and eye, ear, nose, and throat specialists; the modernized professions also atomize our life span into sets of needs defined by age. Professionals have found seven life crises from infancy to old age, each requiring its helping professional. Elisabeth Kübler-Ross has advanced the process by giving us five stages of dying; surely, a new set of helpers will be required for each stage. Following these dying therapists will be research professionals attempting to decide why some people skip stage two, and so on.

Professionalized systems necessarily define need in terms of an increasingly atomized person. While individualizing need may disable by removing people from the social context and the possibility of collective action to solve problems, the atomization of the person removes even the potential for individual action. People are, instead, a set of pieces in need, both in time and space. Hopefully, the pieces can be embodied in a human unit of sufficient residual effectiveness to pay for its servicing.

In summary, professionalized services define need as deficiency while individualizing and atomizing the deficient components. Stated in personal terms, the service systems communicate three propositions; you are deficient; you are the problem; you have a collection of problems. In terms of the interest of service systems and their needs, the propositions become: we need deficiency; the economic unit we need is individuals; the maximal economic unit we need is an individual with multiple deficiencies.

**ASSUMPTIONS ABOUT REMEDIES**

These professionalized definitions of need produce a logical and necessary set of remedial assumptions, each with its own intrinsically disabling effects.

**Unilateral Service**

The first of these assumptions is the mirror image of the individualized definition of need. As you are the problem, the assumption is that I, the professionalized service, am the answer.

You are not the answer. Your peers are not the answer. The political, social, and economic environment is not the answer. Nor is it possible that there is no answer. I am the answer.

The central assumption is that service is a unilateral process. There are, of course, impressive sets of professionalized coping mechanisms that have been developed by sensitive services to deny the unilateral nature of professionalized service. They are described as group-oriented services, peer-oriented services, client-oriented services, and community-oriented services. Each definition is a symbolic attempt to make the needs of servicers who need to deny the unilateral nature of their relationships.

While it is clear that many humanitarian servicers seek a democratic definition for their role, it is difficult to define the bilateral component beyond pay and a feeling of having provided a caring input. Indeed, a basic definition of unprofessional conduct is “becoming involved with the client.” To be professional is to distance, to ensure that the relationship is defined in terms that allow the client to understand who is really being serviced. In spite of the democratic pretense, it is clear that the disabling function of unilateral professional help is the hidden assumption, “You will be better because I know better.”

The political implications of this assumption are central to antidemocratic systems. Indeed, it is possible that societies dependent on
economies of unilateral servicing are systematically preparing their people for antidemocratic leaders who can capitalize upon the dependencies created by unilateral, expert, professionalized helpers who teach people that “they will be better because I know better.”

When Remedies Define Needs
A second disabling characteristic of professionalized remedial assumptions is the power of the remedy to define the need. As professionalized service systems create more elegant techniques and magnificent tools, they create an imperative demanding their use.

The problem with these beautiful, shiny, complex, professional tools is that their benefits are not easily comprehended by the public. Therefore, we see the professions developing internal logics and public marketing systems that assure use of the tools by assuming that the client doesn’t understand what he/she needs. If clients are to have the benefits of professional remedies, they must also understand that professionals know best what they need.

Thus, the complex professional remedial tools have come to justify the professional power to define the need; to decide not only the appropriate remedy but the definition of the problem itself. Increasingly, professions assume that in order to deal with efficiency, they must have the prerogative to decide what is deficient.

It is clear that there is no greater power than the right to define the question. From that right flows a limited set of possible answers. If the service can effectively assert the right to define the appropriate question, he/she has the power to determine the need of his/her neighbor rather than meeting the neighbor’s need.

While this power allows professionals to use their shiny new remedies, it also defines citizens as people who can’t understand whether they have a problem, much less what could be done about it. Modernized societies are now replete with need-defining research and marketing systems. Professionals have recently “discovered” tool-using needs called child abuse, learning disabilities, and removal trauma (requiring therapy for children who are traumatized because they are removed from their allegedly traumatic families). Brigitte Berger has suggested that baldness will soon be defined as a disease because of an oversupply of dermatologists. The final institutionalization of the process is a new program developed by a famous clinic in the United States. The program provides a costly opportunity for people who don’t feel anything is wrong to find out what problems they have that meet the needs of new tools.

When the capacity to define the problem becomes a professional prerogative, citizens no longer exist. The prerogative removes the citizen as problem definer, much less problem solver. It translates political functions into technical and technological problems.

Modernized societies need to determine how we can help these professionalized servicers while limiting their power to disable the capacities of citizens to perceive and deal with issues in political terms.

Coding the Problem
While it is clearly disabling to be told you can’t decide whether you have a problem or what it is, the professional imperative compounds the dilemma by demonstrating that you couldn’t understand the problem or the solution anyway. The languages of professional service mystify both problem and solution so that citizen evaluation becomes impossible. The only people competent to decide whether the servicing process has any merit are professional peers, each operating on the same basic assumptions as the other.

While there are fascinating inter-jurisdictional disputes among servicing peers, these conflicts rarely break the rule that it is only the professional who understands the problem and the solution. The internal conflicts are power struggles over which professionals will be dominant. A professional who breaks the rule of professional dominance will be stigmatized by all the disputants.

The politics of modernized professional power is bounded by peer review. Professional practitioners who support citizen competence and convert their profession into an understandable trade comprehensible to citizens are considered heretics.

The disabling effect of professional coding is its impact upon citizens’ capacities to deal with cause and effect. If I cannot understand the question or the answer—the need or the remedy—I exist at the suffrance of expert systems. My world is not a place where I do or act with others. Rather, it is a mysterious place, a strange land beyond my comprehension or control. It is understood only by professionals who know how it works, what I need, and how my need is met. I am the object rather than the actor. My very being is as client rather than citizen. My life and our society is a technical problem rather than a political system.

As the service professions gain the power to unilaterally define need and code the service process, a fourth disabling characteristic develops. It is the capacity of servicers to define the output of their service as their own satisfaction with the result.

Effective Clienthood
In personal terms, the professionalized progression now assumes that citizens need unilateral professional inputs, they do not know what they need, and they cannot under-
stand the need or the remedy. There remains the supposition that citizens can at least assess the results of being serviced. They may be unable to understand the problems and the solutions. They may have no role in defining or acting upon problems and solutions. But they do have the capacity to decide whether the output, the result, is efficacious.

This understanding is at the center of the consumer movement. It is a valiant last stand of disabled citizens laying final claim on the right to evaluate the effects or outputs of professionalized service.

The implicit assumption of the movement is that citizens are enabled as they become powerful consumers. In this assumption the movement is a tool of the serviced society. It implicitly accepts the service ideology. Citizens are as they consume. Citizen welfare is defined by equitable, efficacious consumption. The service system is a given good. The citizen role is in evaluating the output. While citizens may not understand the service system, the consumer movement assumes they do know whether the system's outputs help or hurt.

Professionally managed service systems are now dealing with this remnant citizen role as consumer. The result has been an increasing professional focus on manipulating consumer perceptions of outcomes.

The paradigm of this process is the school. Unlike most servicing systems, the school is transparent in its institutional definition of the client's role. The school client is evaluated in terms of ability to satisfy the professional. The explicit outcome of the system is professional approval of behavior and performance.

The professional imperative is now universalizing the ideology of the school, communicating the success of effective clienthood. Negating even the client output evaluation, modernized professional services increasingly communicate the value of being an effective client as the proof of the system's efficacy. Once effective clienthood becomes a central value in society, consumerism will wither away.

The consummation of the service ideology will occur as citizens exist in a political economy where they believe that they cannot know whether they have a need, cannot know what their need is, cannot understand the process that purports to meet the need, and cannot even know whether the need is met unless professionals express satisfaction. The ultimate sign of a serviced society is a professional saying, "I'm so pleased by what you've done." The demise of citizenship is to respond, "Thank you."

In individualized terms, the disabling assumptions of professionalized remedies say to citizens: we are the solution to your problem; you don't know what your problem is; you can't understand the problem or the solution; you can't decide whether the solution has dealt with the problem.

Inverted in terms of the interest of service systems and their needs, these propositions become: we need problems; we need to tell you what they are; we need to deal with them in our terms; we need you to feel satisfied by our respect.

RESTORING POLITICS TO CITIZENS

In these terms, the most interesting and important research issues in modernized societies are understanding the needs of servicers and their systems. These systems are obviously important. They provide incomes for a majority of the people. They support national economies. Nonetheless, they are consistently failing to meet their own goals in spite of magnanimous applications of money and personnel. Rather than services, they are producing more and more sensitive but frustrated professionals who are unable to understand why their love, care, and service doesn't reform society, much less help individuals to function.

We should reorient our research efforts toward the needs of servicers. After all, they are the majority of the people in modernized societies and they are an increasingly sad, alienated class of people in need of support, respect, care, and love. Modernized societies need to determine how we can help these professionalized servicers while limiting their power to disable the capacities of citizens to perceive and deal with issues in political terms.

In lieu of this reform, we should understand the political impacts of the disabling nature of professionalized definitions of need and remedy.

Professionalized services communicate a world view that defines our lives and our societies as a series of technical problems. The technical definition is masked by symbols of care and love that obscure the economic interests of the servicers and the disabling characteristics of their practices.

The sum of these disabling characteristics is an ideology that converts citizens to clients, communities to deficient individuals, and politics to a self-serving debate over which service system should have a larger share of the gross national product.

This analysis is not an argument for the reform of professionalized service in order to remove the disabling effects. Rather, the analysis suggests that the disabling effects are intrinsic to modernized professionalized service. Whatever they might provide can only be assessed after we recognize them as essentially self-interested systems with inherently disabling effects. Within this framework, the political definition of a citizen can be restored. The inherently disabling effects of professionalized service can be assessed and balanced against their possible benefits. Policies can be developed that select those service benefits that overbalance the intrinsically disabling effects.

In the meantime, the politics of modernized societies may well be the conflict between the irresistible force of the service business and the obstacle created by citizens who have experienced the disabling help of privileged professional servicers who wear the mask of love.