

## **The God Committee: Likeness & Dichotomy**

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### Abstract

In the 1960s, The God Committee was a group of seven everyday citizens, not doctors, given a trolley problem: they were tasked with selecting which people could receive the costly renal failure treatment, and turning the rest away. Because dialysis was new and only available in Seattle, if the committee did not select you for the procedure, you were as good as dead. As one could imagine, choosing who lives and who dies was not an easy task, nor was it free of societal values.

Racism, ageism, sexism, ableism and classism were all evident within the decisions made by these individuals. Whether the decisions were pure prejudice or justified using the monetary disadvantages caused by these values being institutionalized is debatable, however. Unfortunately, while it does not take place in this exact form today, morality within science is still a contemporary issue.

### Likeness & Dichotomy

I am a man who wants another chance.

**I am a man who wants another chance.**

I live in a nice house with two kids, a wife, and a dog.

**I live in an apartment with electricity I can't always afford to keep on.**

I am a man dying of renal failure.

**I am a man dying of renal failure.**

My mother and father are natural born American citizens.

**My mother and father are immigrants from Nigeria.**

I just found out that there might be hope for me.

**I just found out that there might be hope for me.**

I drive to the clinic in the 1955 Chevy Bel Air I bought to avoid the fuss of public transit.

**I take the bus to the clinic that was segregated only seven years ago.**

This is the most important decision of my life.

**This is the most important decision of my life.**

The clinic told me I was selected to receive dialysis today.

**The clinic told me I was not selected to receive dialysis today.**

I am going to live.

~~I am going to die.~~

**Has Science Gone Too Far?**



Scene One

FADE IN:

EXT. SUBURBAN HOME – DUSK

In a nice neighborhood located in Seattle, mail was recently delivered.

DISSOLVE TO:

INT. SUBURBAN HOME – KITCHEN - DUSK

TOM, one of seven members on the committee responsible for determining who receives kidney transplants at Seattle's Swedish Hospital, sorts through mail while sipping on coffee.

TOM

I can't believe it.

MARGARET, a dedicated RN at Seattle's Swedish Hospital, and wife of Tom, is in the process of preparing dinner.

MARGARET

What... did we seriously max out the credit cards again?

TOM

No, I haven't read it yet, but I think this might be worse. I just got a letter from a patient that got turned away.

MARGARET

What!? How do they know who you are? How do they know our address!? I thought the committee is anonymous!

TOM

Yeah, I did too. I guess you can't trust anyone nowadays.

Margaret stops cutting the vegetables and turns to Tom.

MARGARET What does it say?

Tom clears his throat while flattening the creases on the paper and reads:

TOM

"Hello. My name is Xavier Thornton. My case went before you a couple of weeks ago. It took me that long to be able to track one of you down. I apologize for doing so, but I feel like I owe it to myself to at least try to have you see me as a person. The file you read was two-dimensional, undoubtedly. I obviously haven't seen it, but I'm positive it couldn't state much more than the fact that I'm a black man who doesn't even own a suit, let alone a piece of land. My skin color, my height, my weight, or my salary isn't what defines me. That is why I am writing you, sir. That is why I went out of my way to make sure this letter reached one of you. I don't think you understand who Xavier Thornton really is, or at least I'm hoping you didn't, and that's why I was rejected.

Here are some things that could not possibly be on your file:

I work relentlessly, and send the money I make back home. Even if I would have saved all of that money, I doubt I could have afforded this treatment.

I love to play music because there's no restraint and no way to be incorrect. I've been beaten for no other reason than my skin color. The wounds heal, but having to worry about the same thing happening to my son is something that will never go away.

I can cook the recipes of my grandmother almost as well as her.

My kidney may be bad, but the rest of my body is good.

I may not be the most intelligent, but I do love life almost as much as I love my wife and my family.

I could go on for pages, but I think you get the idea. I know your decision cannot be changed. I know I am going to die. But, I was not going to die without at least trying to provoke you to think about more than what is presented to you.”

Tom’s voice starts wavering and Margaret embraces him.

MARGARET

I’m so sorry, honey. I don’t think they put into account how hard this is on you. It’s not like you enjoy this, or have the power to accept everyone.

TOM

I hate to feel self-pity when I am sentencing men to death while I get to live, but on the other hand, the burden of making these decisions is gut wrenching.

MARGARET

No man should have to go through this, yet here are seven of you. Is there any way for this to end? I mean, what if someone like Xavier found us and tried to threaten us, or hurt us? Even without our safety in jeopardy, I hate seeing you come home looking empty knowing there’s nothing I can do to help.

TOM

I’ve thought about leaving before, but I don’t know how we would pay our bills. Title XVI of the Social Security Act is making its way through the law process and would give people like Xavier the financial ability to get dialysis. That makes me feel slightly better, but it just doesn’t feel right, and it never did. It’s like I go to work and play God and then come home and pray to him. Some men would revel in the power, but it makes me sick thinking about it.

MARGARET

Please don’t only do this because of bills. We don’t need this house, the car, or anything else. I want you to be happy. I could even go and get a job too, whatever it takes. But I am really happy to hear about the Social Security amendment, for both your sake as well as the people it would help. If you or I had renal failure, I don’t know how we would pay for it. I can only imagine what it would be like for people less fortunate than us. For now, just try to think of it like this: you’re helping as many people as you possibly can. While Xavier is right, their files don’t allow you to truly know the people you are accepting or rejecting, you try your hardest to select who you think needs it most.

TOM

Margaret, I want to provide for you like a man should. I appreciate that you’re willing to make sacrifices for my happiness, though.

Tom reaches for Margaret’s hand

TOM

And you’re right; it is a lot easier to think of it more simplistically. I am helping as many people as I am able to. But, that letter has made me realize something I don’t think I like about my decisions... or myself. In my time doing this work, I can count on one hand how many black men I have accepted. You want to know why I even chose him? Because that was the only time we were given a selection of all minorities. I favor white men, while putting anyone else out to die. Their yearly salaries, and even their damn IQs are on those files. Instead of

thinking how we should, that the poor can't afford it at all, we give it to the smart white men with more money. It makes me realize I was never deciding based on whether I thought the person needed it most. The others and I justify it by saying they are the most worthy because they put in a hard day's work and will continue to be beneficial to society. I never really thought about it this way before, so I doubt the other six men do either. We are even more despicable than I thought. Even if I want to be prejudiced in my daily life, which I don't, I shouldn't let it affect my decisions on the committee. Sorry to lay all of this on you, honey, I'm just thinking out loud.

MARGARET

Don't apologize; it's good to get it out. I think realizing your bias is the beginning of changing it. It has only been a couple years since all these marches and bus boycotts, and while it has always been wrong, I think we are just starting to realize how racist we actually are. Even if we aren't consciously trying to be discriminatory, it has been so enforced in our culture we act on it subliminally.

TOM

You're right. I am going to talk to the other members of the committee and see if I can get them to see this side of things. Maybe read them the letter from Xavier. Quitting will only make some other poor man have to fill my shoes, at least this way maybe I can make the process a little more fair, even if we are forced to play God. In the meantime, I will keep praying that the Title XVI passes and this can soon stop all together.

FADE OUT:

Epilogue

The God Committee sparked many of the questions that stimulated the formation of bioethics. Not only was it a question of whom, if anyone, should have the authority to make these decisions, but it was also about what information they should take into account. Nonmedical aspects like ethnicity, age, gender, socioeconomic status, intelligence, personality traits, and vocational skills were all up for consideration. None of this is a problem if you are a white, young, rich, smart, able-bodied male. For the rest of the population, though, this fact was disheartening. Racism, ageism, sexism, ableism and classism should have no place in the medical field, because disease is nondiscriminatory, but it does. In his 1978 Hastings Report, Allan Brandt asserted this claim by saying "the notion that science is a value-free discipline must be rejected," because it's apparent how interconnected science and medicine are to the values of the society in which they take place.

Now that it is 2016, we no longer have to worry about this mysterious triage group. Unfortunately, that does not mean that there are not still bioethical problems within our organ donation system. Between 2000 and 2004, members of the Japanese mafia received liver transplants, then proceeded to make a donation of \$100,000 to the UCLA, which understandably raised eyebrows. This brings up socioeconomic issues, like how much money should organs cost, as well as the debate of whether or not criminals "deserve" transplants. Another big factor that is still a problem today is age. It seems like there is almost a consensus that children's lives are worth more than an elderly person's. Since the end of the committee almost sixty years ago, medical ethics has greatly improved, but the finish line is still out of sight when it comes to equality within the medical field.

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