

University of Texas – College of Pharmacy
Class of 2007 Commencement Address
“A Balancing Act: The Leader, The Artist, The Caregiver”
May 18, 2007

Thank you Dean Crismon for your kind introduction and hospitality shown to me this morning. I am delighted and honored to be here with you all today. What a great honor to be ‘inside’ the University of Texas College of Pharmacy family for these few precious moments.

To the faculty members, families and friends of the graduating Class of 2007, I extend to you my sincerest and deepest congratulations and thank you. Each of you has played a significant role in helping this class to make it here today. Some of you have helped pay the tuition, and that certainly hasn’t hurt!

To the Class of 2007: Today, we celebrate YOU! The countless hours, long nights and little sleep have paid off. Today, we celebrate the beginning of a new and exciting chapter in your lives – that of a learned participant in American life.

It is a monumental occasion. Today marks the beginning of your professional career. Today marks your commitment to the advancement of the profession of pharmacy, and more so, your commitment to the healthcare services system as a whole.

In honoring this commitment to our patients in America's health care system, allow me to reflect upon lessons from the past to help guide your future footsteps.

Many social philosophies of the past greatly impact today's healthcare environment. How we as individuals view our role in the health care system greatly impacts how we treat those who seek our care services. Within the U.S. healthcare system there is much tension. And, as new practitioners in pharmacy, you will experience these tensions. Let me explain what I mean by that.

Imagine with me two ends of a philosophical spectrum: on one hand, we consider the free-market, unfettered capitalistic ideals. On the other hand, we consider the communitarian, collectivist ideals. In reality, these two social philosophies are both at work and differentially reflect the aspirations and priorities set within America's communities. And today, in many respects, these two social views create significant social debate and community tensions.

We see many demonstrations of the free-market, capitalistic view. Within the U.S. healthcare system, many economists argue that capitalism is not the root of America's healthcare problems. It is the cure. They feel that by allowing free markets within our healthcare system, healthcare will ultimately become more accessible and more affordable (1). Witness the construction of the Part D benefit under Medicare. Consider health savings accounts (HSA's).

The concept of free trade and unfettered markets is not a new social view. It was first systematically developed in the 18th century by Adam Smith. Known as the forefather of the intellectual movement called the Scottish Enlightenment, Adam Smith has been credited with helping to create the modern discipline for the study of economics.

His treatise, *The Wealth of the Nations*, studied the rise of commercial and industrial development in England and Europe. It provided some of the first intellectual foundations and rationales on free trade, capitalism and libertarianism.

Smith supported a free economy. He rejected antiquated government and guild restrictions, and believed that government control was largely to blame for hindering industrial expansion.

He opposed any government interference of business beyond what was necessary for a free-enterprise system to regulate itself. Today, his beliefs are greatly responsible for the economic theory known as “laissez-faire” economics — which in English means “let go” (2).

In America’s healthcare system, we see Smith’s free-market views applied now more than ever. Many economists and politicians are urging for greater deregulation. They argue that government programs such as Medicare and Medicaid only artificially control prices by limiting market competition and technology advancements, and ultimately cause healthcare costs to rise (1).

In contrast, on the other end of the philosophical spectrum, we see the collectivist, communitarian philosophy emerging — perhaps as a push-back to the “laissez-faire” concept. We hear calls for universal health care coverage. We want to control skyrocketing drug prices. There are calls for a communal focus.

Communitarianism is a fairly new social philosophy which only really began to emerge in the 20th century. Communitarians theorize that the focal point of social and economic decision-making should be aimed at and by communities. Communitarians hold that the government should empower communities with strategies of support, especially in areas of education, social services and healthcare (3).

Many communitarian theorists assert that some of the most pressing issues facing America, such as poverty, multiculturalism, and economics, are largely due to society’s lack of focus and priority on community as a whole. They decry the individualistic orientation. They hearken to the notion of ‘all for one and one for all.’

A book I found to be interesting in understanding this social view is Clifton Taulbert's *Eight Habits of the Heart: Embracing the Values that Build Strong Communities*. In *Eight Habits of the Heart*, Taulbert provides eight "front porch" lessons he learned while growing up in Mississippi. In embracing these habits, Taulbert suggests that we must begin to create communities branded with respect, compassion, service and competence. He describes eight community habits, to include:

1. A nurturing attitude,
2. dependability,
3. responsibility,
4. friendship,
5. brotherhood,
6. high expectations,
7. courage, and
8. hope (4).

Today within America's healthcare system, we see these eight habits and many communitarian principles attempting to emerge. More and more, communitarian idealists are urging the government to take more responsibility in protecting the moral integrity and unique character of America's healthcare system from commercialism (5).

We hear many calls by prestigious organizations, such as the Institute of Medicine, to put the patient at the center of our care. We hear pleas for partnering patients with providers and placing more responsibility for care on the patients themselves in a partnership relationship.

Right now I'm sure you are wondering: what do these social theories have to do with the profession of pharmacy, and more importantly what do they have to do with me? Where is this guy going with this theoretical gibberish? Well...allow me to connect the dots!

As I mentioned earlier, today's ceremony marks the beginning of your learned, professional careers. But, today's ceremony also signifies your inheritance of these social challenges. From now on, as healthcare professionals you will experience these social tensions on a daily basis. You will be in the squeeze between the market and the compassionate needs of the patient.

These social tensions will challenge you. They will influence your participation in the civic dialogue. And, they will impact your role as a learned person in a democratic society. You may not have thought about that as yet. But, I challenge you to give serious thought to how you, as individuals and as a collective, will engage in the civil dialogue concerning the future of our healthcare services system and our profession's role in it, given the realities of the tensions I have described.

As pharmacists, it will be up to you to understand the tensions that normally come from competing social philosophies. You must now internalize these tensions, and begin to understand how these social tensions will affect you from a professional practice, healthcare system, and patient perspective. It's not just about how will I be involved in my practice on a daily basis. It's also about how can we effectively care for our patients and achieve the outcomes we desire in the bigger context of our health care services system.

I will admit these challenges are DAUNTING! But, they are not insurmountable. They will require each of you to continuously strive to find balance between the "no margin, no mission" notion and the communitarian-centered ideals. Ultimately, finding this balance and practicing in this balanced context will separate you from being a pharmacist who just dispenses medication as a daily 'grind,' and being a healthcare professional who provides real care to make a difference in the life of every patient.

As you begin your careers as pharmacists, I challenge each of you to not get trapped into the pitfalls of complacency, neglect, or greed. You must rise above these potential pitfalls and resist the idea that the social tensions I described and other related issues will manage themselves. You must rise above and believe that it is up to you. You are tomorrow's leaders. You are tomorrow's upper echelon. I repeat...you are tomorrow's upper echelon. You've probably never been called that!

Upper Echelon Theory is based upon the premise that top leadership matters. It asserts that the way leaders think and make decisions is greatly influenced by their knowledge, values, career experiences, and formal education (6). It serves as a functional roadmap in identifying key qualities necessary for today's leaders.

In applying Upper Echelon Theory to you and the social tensions affecting today's healthcare system, it is important to understand that TOP LEADERSHIP MATTERS! YOU MATTER! And, most importantly, THE PATIENT MATTERS!

In tackling the social tensions I spoke about earlier, you must strive for being great. You must aim high and BIG! And since the saying goes: “everything is bigger in Texas,” I’m sure each of you is up for this challenge.

In becoming an Upper Echelon leader, I also call on you to strive to balance the creative and spiritual aspects of virtue, faith, organizational change, and vision. As top echelon healthcare professionals, you will find yourself to simultaneously becoming a leader, an artist and a caregiver.

As the Leader:

- You’re in luck! You all are the newly-minted alumni of a model institution. The University of Texas has a rich history of establishing a pipeline of pharmacy leadership talent. Your education and experience will greatly aid you in becoming a quality leader. You’ve got the tools and the toolbox.

- But do not rest on your laurels. The healthcare landscape is constantly changing. Never become so satisfied with your achievements that you lose sight of what is happening. To be an effective leader, it will require discipline and consistency. Therefore, continue to hone your skills and always seek new knowledge. In that, you have no choice if you wish to stay on the top of your game.

As the Artist:

- You must be bold! You must be daring! You must be creative! You must leave your “mark” for the betterment of your patients and our profession.
- In all ways, seek to be innovative and creative in ways that best fulfill the needs of the patient – be a change agent, a trailblazer! The patients need you!
- Be the voice of the future, and think beyond the “now.” Never lose the fight in addressing ways in which you can improve tomorrow. There are no hopeless situations; there are only people who have grown hopeless about them. Never become hopeless. The patients need you!

And lastly, as the Caregiver:

- You must be just, circumspect and ethical. This will not be easy, and on many occasions you will be faced with opposition and fear. But, the only way to conquer fear is to keep doing the things you fear to do.
- You must stand up for what you know is right, and always strive to set an example. You must set the example which epitomizes the true virtue of our profession and its social imperatives.
- You must remember to have a heart when interacting with patients, and never lose your compassion and humility.
- You must never ignore or neglect your “internal compass.” Always be true to yourself and let your higher power guide you in the right direction. And remember, every compass needs to be re-calibrated from time to time. Therefore, occasionally re-examine your choices and if needed, reorient yourself to your true purpose and values. Or in the words of Shakespeare: “To thine own self be true” (7).

To better understand the personal-nature of your new responsibilities, I would like you to consider this scenario:

Imagine a family member of yours that has a serious medical condition that will require the care and expertise of your classmate to your left and/or right.

How confident are you in the quality of care they will provide to your loved one?

How confident do you think they are of you?

When you leave today, each of you will go your separate ways and hopefully continue to develop your capabilities as highly skilled and competent pharmacists and leaders. It is unknown when or where, but at some point your paths or the paths of your loved ones may cross with a pharmacist in this room today.

I only hope that when these paths meet, you will have provided the quality of care to their loved ones as you would expect your mother, father, brother, sister, husband, wife and/or child to have received.

As you begin to reconcile the social tensions facing today's healthcare system, and as you begin your journey in becoming the leader, the artist, and

the caregiver, allow me to share a quote of encouragement by Orison Swett

Marden:

“Just make up your mind at the very outset that your work is going to stand for quality... that you are going to stamp a superior quality upon everything that goes out of your hands, that whatever you do shall bear the hall-mark of excellence”.

Thank you and congratulations Class of 2007! I wish you Godspeed and every success! Thank you for the privilege to speak and allowing me to be a part of today’s celebrations! And in the words of Dr. Seuss: Oh the places you will go!

Thank you!

References:

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