

five or six traditional “hard news” items, compared with about 20 in the Huntley-Brinkley heyday. Instead of news about government and world events, the networks are giving

viewers the lowdown on such subjects as day-dreams, telephone psychics, and unidentified flying objects. Today, it seems, all TV news is “local.”

## *A Room of One's Own*

“The White House Beat at the Century Mark” by Martha Joynt Kumar, in *Press/Politics* (Summer 1997), Kennedy School of Government, Harvard Univ., Cambridge, Mass. 02138.

In 1895, William Price, a reporter for the *Washington Evening Star*, took up a position outside the front gate of the White House, and from it, buttonholed politicians who had been in to see President Grover Cleveland. Soon, wrote Washington correspondent Delbert Clark in 1941, Price was joined by other reporters. For seven years, in good weather and bad, they persevered until finally, one wet day in 1902, President Theodore

It's a nice little story, and scholars and journalists have repeated it over the years to explain the origins of the White House press corps. But there's very little truth in the tale, says Kumar, a political scientist at Towson University, in Maryland.

In prosaic fact, she says, the newsworthiness of the presidency had grown so much by President Cleveland's administration that in 1896 Price and two other correspondents were given a table in a White House corridor at which to work. After William McKinley became president, he turned the whole second-floor corridor over to the press. During the Spanish-American War (1898), as journalist Ida M. Tarbell wrote that year in *McClure's*, a half-dozen or more reporters could routinely be found “in the outer reception-room of the business part of the White House, a corner containing a well furnished table and plenty of chairs.” In 1902, President Roosevelt gave White House reporters a large room in the new “temporary offices” (now the West Wing). Eager to use “the bully pulpit,” TR made himself more accessible to the correspondents than his predecessors had been, Kumar notes. He was the first president to meet regularly with reporters, but not the first to give them a home in the White House.



*President Theodore Roosevelt skillfully used reporters to promote his aims with the public.*

Roosevelt, taking pity on the rain-soaked wretches, “called in his secretary and then and there directed that a special room be set aside in the newly built Executive Offices for the sole use of the press. The Washington correspondents had come of age.”

## RELIGION & PHILOSOPHY

### *The Death Debate*

*A Survey of Recent Articles*

Six prominent philosophers took an unusual step earlier this year. Setting aside their differences on “many issues of public morality and policy,” they joined in urging the U.S. Supreme Court to uphold

two appeals courts' rulings and give terminally ill patients a constitutional right to kill themselves.

“Though academic philosophers have been parties to amicus briefs before, as mem-

bers of organizations or as representing an applied specialty like bioethics, I am unaware of any other occasion on which a group has intervened in Supreme Court litigation solely as general moral philosophers," observes Ronald Dworkin in the *New York Review of Books* (Mar. 27, 1997), in an introduction to the brief that he and five other professors filed. Joining Dworkin, of Oxford University and New York University, in "The Philosophers' Brief" for physician-assisted suicide were Robert Nozick, John Rawls, and Thomas Scanlon, all of Harvard University, Thomas Nagel of NYU, and Judith Jarvis Thomson, of the Massachusetts Institute of Technology.

Though the Supreme Court did not take their advice, and instead, this past June, unanimously reversed the two lower courts, the philosophical debate is far from over.

Dworkin and his colleagues are firmly "pro-choice": "Just as it would be intolerable for government to dictate that doctors never be permitted to try to keep someone alive as long as possible, when that is what the patient wishes, so it is intolerable for government to dictate that doctors may never, under any circumstances, help someone to die who believes that further life means only degradation."

The six philosophers reject the usual moral distinction, as it has evolved among bioethicists in recent decades, between allowing someone to die (by, for instance, withdrawing "extraordinary" life-sustaining treatment) and killing that person (by, say, giving a lethal injection with the intention of causing death). In either case, they maintain, "the doctor acts with the same intention: to help the patient die."

Their argument leaves J. Bottum, associate editor of *First Things* (June–July 1997), unimpressed. The authors of "The Philosophers' Brief," he says, resolutely refuse "to engage in philosophical analysis." While they "dismiss as philosophically naive ('based on a misunderstanding of the pertinent moral principles') the commonsense distinction between letting die and killing, the brief uses such commonsense phrases as 'in the patient's best interest to die' without any nod toward their philosophically difficult character. (How, a philosopher ought to ask, can it ever be in anyone's best interest to cease to have interests?) . . . And in a fairly straightfor-

ward begging of the question near the end of the text, the brief asserts that there exist patients 'whose decisions for suicide plainly cannot be dismissed as irrational or foolish or premature,' offering as a self-evident premise what was supposed to be proved as the conclusion."

Like Bottum, F. M. Kamm, a professor of philosophy at NYU and a visiting professor at the University of California, Los Angeles, is unwilling to give up the traditional distinction between killing and letting die. But, writing in *Boston Review* (Summer 1997), she nevertheless maintains that "assisted suicide (and euthanasia) are sometimes morally permissible." The "strongest case" for assisted suicide, she says, is "if the overriding aim is to end physical pain," though with modern techniques of pain control, the need may be rare. But the patient has a right to avoid pain.

Marcia Angell, executive editor of the *New England Journal of Medicine* (Jan. 2, 1997), argues "that if expert palliative care were available to everyone who needed it, there would be few requests for assisted suicide." For those who can't be adequately helped, she believes, physician-assisted suicide should be available. The distinction between killing and letting die is "too doctor-centered," in her view. "We should ask ourselves not so much whether the doctor's role is passive or active but whether the *patient's* role is passive or active." The fact that assisted suicide is voluntary "provides an inherent safeguard against abuse," she believes. And recent reports from the Netherlands, where physician-assisted suicide and euthanasia have been given legal sanction since the early 1970s, "indicate that fears about a slippery slope there have not been borne out." Studies in 1990 and '95 indicated that the incidence of doctor-assisted suicide there remained about the same, 0.2 percent of all deaths, while euthanasia increased from 1.7 percent to 2.4 percent. The investigators did not regard this jump as very significant.

But Herbert Hendin, of the American Foundation for Suicide Prevention, and two Dutch colleagues, writing in the *Journal of the American Medical Association* (June 4, 1997), maintain that Holland is already sliding down the "slippery slope." In recent decades, they write, "the Netherlands has moved . . . from euthanasia for terminally ill patients to euthanasia for those who are

chronically ill, from euthanasia for physical illness to euthanasia for psychological distress, and from voluntary euthanasia to non-voluntary and involuntary euthanasia.”

According to the 1995 Netherlands study, in 0.7 percent of all deaths, physicians admitted they had actively ended patients’ lives without their explicit consent. In all, Hendin and his colleagues point out, the estimated number of deaths caused by physicians’ active intervention of one sort or another—euthanasia, assisted suicide, ending the life of a patient without his or her consent, and giving pain medication with the explicit intention of ending the patient’s

life—increased from 4,813 (or 3.7 percent of all deaths) in 1990 to 6,368 (or 4.7 percent) five years later.

Medical standards in the care of terminally ill patients in the Netherlands have eroded, and doctors have failed to take advantage of advances in palliative care, Hendin and his coauthors argue, as euthanasia, “intended originally for the exceptional case,” has become an accepted form of “treatment.” In one recent case, they report, a Dutch patient with cancer who had said she did not want euthanasia “had her life ended because in the physician’s words, ‘It could have taken another week before she died. I just needed this bed.’”

## *When in Rome . . .*

“Jerome and the Sham Christians of Rome” by John Curran, in *The Journal of Ecclesiastical History* (Apr. 1997), Robinson College, Cambridge CB3 9AN, UK.

Saint Jerome (A.D. 340?–420), the learned ascetic who is especially remembered for his translation of the Bible into Latin (the Vulgate version), had little good to say about the high-living upper-class Christians of fourth-century Rome. But underneath the legendary disdain of his polemics, argues Curran, a professor of ancient history at Queens University of Belfast, Jerome was waging “a vigorous struggle for the support of the city’s elite.” He gathered about him a circle of noble Roman Christian women, mainly widows, including Paula, his most devoted disciple. “Much of the vigor of Jerome’s criticism of ‘sham’ Christians,” Curran says, “came from the uncomfortable knowledge that his friends were from, and in certain ways remained close to, this world.”

During the fourth century, Curran points out, clerics and monks drew closer to Rome’s aristocratic families, and in theological disputes in the latter part of the century, sought to win this audience over. Jerome, for example, crossed swords with a certain Helvidius, who argued in the 380s that after Christ’s birth, his mother Mary “enjoyed a full and normal married

life.” The implication for ordinary Christians was that married life was not inferior to the celibate life of a virgin. Jerome made a “skillful and tendentious rebuttal,” quoting Saint Paul and arguing that a married woman seeks to please her husband, while an unmarried virgin is able to serve the Lord.

Jerome looked askance at the active social life that some well-born Christians in Rome enjoyed, and warned against the temptations of good food and drink. He was suspicious even of such Christians’ benefactions: “Many



*Saint Jerome, with Crucifix and Bible near, as depicted by the 17th century Flemish painter Anthony van Dyck*