



4-1-2015

## Social Justice as a Moral Imperative

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### Recommended Citation

Hemphill, B. (2015). Social Justice as a Moral Imperative. *The Open Journal of Occupational Therapy*, 3(2). <https://doi.org/10.15453/2168-6408.1150>

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# Social Justice as a Moral Imperative

**Keywords**

justice, ethics, philosophy, theology, common good, social movements, injustice, political, principle 4, occupational justice

**Credentials Display**

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DOI: 10.15453/2168-6408.1150

If I have denied the desires of the poor or let the eyes of the widow grow weary, if I have kept my bread to myself, not sharing it . . . if I have raised my hand against the fatherless, knowing that I had influence in court, then let my arms fall from the shoulder, let it be broken off at the joint. (Job 31:16-19 New Revised Standard Version)

Social justice is a moral imperative that originated in ancient literature. Today, there are differences of opinion about the precise definition of the phrase social justice. But the general concept is that individuals and groups should receive fair treatment and an impartial share of the benefits of society.

## History of Social Justice

### Ancient Origins

The term justice originated in Judean literature, and it continued to be used in the biblical New Testament. As such, the term has a strong historical religious connection. The Hebrew terms for justice are *mishpat* and *sedeq*. *Mishpat* was used in ancient documents to refer to the protection of the poor, the widow, the alien, and the orphan, and to acts that bring about justice for their sake (Jer. 9:23-24; Ps. 10:17-18). In the Old Testament, this care is universal and is demanded from all people (Deut. 10:18-19).

The Hebrew root word *sedeq* is translated as right, righteous, and righteousness. When translated into English, the words just, justice, just cause, justification, and justify are appropriate translations of these three Hebrew words (Keller, 2010). In the New Testament's book of Romans,

the root word for right, righteous, and righteousness is *dikaio*, which again further translates into the English word justice.

The term social comes from the Hebrew word *tzadeqah*, meaning justice or righteousness. It is commonly used to mean charity but is also used to mean obligation. It is based on the Hebrew word *tzedek*, meaning righteousness, fairness, or justice.

When the two words social and justice are joined together, this contextualizes the relationship with the client and the world ("Social justice," 2011). In the New Testament, the parable of the Good Samaritan is an example of social justice, demonstrating the concept that we are all our brothers' keepers (Wallis, 2013). Paul, writing in the book of Galatians, makes it clear that helping all people is not optional; it is a command.

### Western Historical Concepts

The concept of social justice has been addressed by some of the greatest minds in Western civilization, including Plato, Aristotle, Hobbes, Locke, Hume, Rousseau, Kant, Hegel, Marx, Mill, and Rawls. The term social justice began to appear in the literature during the 1840s. A Jesuit priest, Taparelli d'Azeglio, coined the term. "Justice," he argued, "is the habitual inclination to level or balance accounts. Distributive justice equalizes proportions in the common good" (Burke, 2014). According to Keller (2010), balance means to engage in relief, development, and reform.

In his classic book, *Rights of Man*, Paine (1792) advocated for social justice—that persons should be given fair and equal rights to all aspects of society. It was in the late 19th and early 20th

centuries that social justice became an important theme in American political and legal philosophy. Rawls (1971) further explored social justice in the late 20th century when it was central to the philosophy in his book, *A Theory of Justice*.

### **Social Justice: A Global View**

In the 20th and 21st centuries, there have been several social justice movements in the United States and throughout the world. Collectively called the Global Justice Movement, they have been described as movements toward a socially just world. In this context, social justice is defined as “the way in which human rights are manifested in the everyday lives of people at every level of society” (Edmund Rice Centre, 2000, p. 1). These movements promote the realization of a world where all members of a society, regardless of background or procedural justice, have basic human rights and equal access to the benefits of their society.

Liberation theology is another movement with an emphasis on social justice. It is an “interpretation of Christian faith out of the suffering, struggle, and hope of the poor [and] a critique of society and ideologies sustaining it” (Berryman, 1987, p. 29).

A third movement that is more recent has made its way into the field of bioethics, with an emphasis on health care. Farmer, Nizeye, Stulac, and Keshavjee (2006) have stated that preventable differences reflect social injustices among people in the form of health inequities. Where there are incidences of infectious diseases caused by poor living conditions, including education and economic

deprivation, injustices occur (2006). Further, Cueto (2004) has claimed that health injustices are prevented by providing social and economic resources that are given in primary treatment facilities, which ensures the general population has fair access regardless of social location, economic circumstances, gender, and political preferences.

In the 2006, the United Nations document “Social Justice in an Open World: The Role of the United Nations” proposed a global definition: “Social Justice may be broadly understood as the fair and compassionate distribution of the fruits of economic growth . . .” (p. 16). The term social justice was viewed by the United Nations:

. . . as a substitute for the protection of human rights [and] first appeared in the United Nations texts during the second half of the 1960’s. At the initiative of the Soviet Union, and with the support of the developing countries, the term was used in the Declaration on Social Progress and Development, adopted in 1969. (p. 52)

### **Defining Social Justice in America**

American society is deeply divided over the definition of social justice; in fact, social justice “does not have a definition in our culture that we can all agree on” (Keller, 2010, p. 150). Sandel (2009) described three competing views of social justice: (a) maximizing welfare, (b) respecting freedom, and (c) promoting virtue. Sandel wrote: the most just action is that which brings the greatest good to the greatest number of people. . . . The most just action is that which respects the freedom and rights of

each individual to live as he or she chooses. . . . justice is served when people are acting as they ought to, in accord with morality and virtue. (as cited in Keller, p. 154)

Wallis (2013) stated that many in our society, including political leaders and church leaders, fear the presentation of social justice as a moral imperative. Church and political leaders prefer to focus upon charity and assisting the poorest in the best manner that our society can.

Smith (2010) has reminded us:

by the rules of secular discourse that reign particularly in government, politics, and the academy, no one is allowed to ever bring religious beliefs into public argument. We are not supposed to talk about moral rights and moral evils . . . we should only talk about justice in the supposedly neutral terms of freedom and equality that we all agree on. (as cited in Keller, p. 154)

### **Social Justice in Occupational Therapy**

#### **Definition**

The definition of social justice in the context of occupational therapy for the United States is defined in the *Code of Ethics & Ethics Standards* 10th edition (American Occupational Therapy Association [AOTA], 2010). It states, “*Social justice . . . called distributive justice, refers to the fair, equitable, and appropriate distribution of resources*” (p. S21). While opinions differ regarding the most ethical approach to addressing the distribution of health care resources and the reduction of health disparities, the issue of social

justice continues to focus on limiting the effect of social inequality on health outcomes.

Scott and Reitz (2013) further delineated the definition by stating that this principle also commits practitioners to providing services to individuals regardless of their ability to pay, social location, or circumstances. This principle has brought the profession into alignment with other healthcare professions’ ethical codes.

#### **AOTA Code of Ethics & Ethics Standards**

Principle 4 in the current occupational therapy *Code of Ethics and Ethics Standards* (AOTA, 2010) states: “Occupational therapy personnel shall provide services in a fair and equitable manner. . . . The principle of social justice refers broadly to the distribution of all rights and responsibilities in society” (p. S21).

When Principle 4 was originally developed, feedback was sought from agencies (e.g., state regulatory boards, National Board for Certification in Occupational Therapy [NBCOT]) and the AOTA membership with no reference to any political ideology from respondents. The inclusion of social justice in the *Code of Ethics & Ethics Standards* was thoroughly discussed by the AOTA representative assembly at that time. Then a motion posed to the assembly proposed that Principle 4 be removed from the *Code of Ethics & Ethics Standards*. The debate appeared to center on a personal political ideology, not the common good.

From the beginning, the AOTA Ethics Commission was clear about the intent of Principle 4. The concept of social justice is embedded in the tradition of occupational therapy practice (Scott &

Reitz, 2013), and the term has been included in the ethics statements of many other health and medical professions.

How to go about helping those in need of social justice and equal opportunity in health care will continue to be debated. This debate should focus on the process of how to deliver health care in an equitable manner, not whether social justice is an appropriate matter of concern for the profession.

As Purtilo and Doherty (2011) have noted:

All nations face questions of limited healthcare resources and escalating costs. These issues worldwide create ethical challenges that involve the *allocation of healthcare resources*. Allocation is a term that suggests intentional decisions about how a good is distributed. In ethical deliberation, such challenges fall within the category of distributive justice. (p. 340)

According to Katherine Reed, former chair of the AOTA Ethics Commission, all recipients of occupational therapy services should be treated as equals (K. Reed, personal communication, August 18, 2014). For example, during WWI reconstruction aid, all soldiers, regardless of rank, received the same amount and quality of treatment. Rank did not have privileges.

Who receives service is addressed by the concept of social justice. How the service is delivered and toward what outcome is covered under beneficence within the AOTA's *Code of Ethics & Ethics Standards*. Who is receiving service has legal implications because of the fair treatment doctrine under the law as regulatory code

within the ethics statements. Occupational therapists generally have viewed fair treatment to include aspects not covered by law, such as diagnostic outcomes.

Advocacy for more or greater distribution of healthcare resources is primarily aspirational; it is more than economic redistribution. Instead, advocacy could be considered as a means to strive for the common good to assure all humans have the same rights to certain aspects of life: freedom, justice, health, and well-being. While some in the US are reverting to the idea that individuals who are higher in social rank are entitled to more privileges than those lower in social status, this is not consistent with the historical values of occupational therapy. Reed (K. Reed, personal communication, August 18, 2014) has further stated:

Occupational justice is not a moral term that is recognized and it is not embedded throughout our professional documents. Occupational justice may be viewed as a subset of social justice and is only known within the profession of occupational therapy. Other professions do not recognize the term to mean equal opportunity for health care. Social justice in the context of occupational therapy is concerned with the equality of moral worth of all persons.

### **AOTA Code of Ethics Review Process**

As part of a five-year review cycle and in keeping with the procedures followed by the AOTA for all official documents, the Ethics Commission of the *Code of Ethics & Ethics Standards* is seeking feedback about any changes. AOTA members have

an opportunity to provide input and review any official documents of the association. The timeline for this review is published on the AOTA website.

It is of utmost importance to note that this debate about Principle 4 is about ethics; it is not a political debate. Political ideology has no place in a discussion about the human distribution of health care to the orphaned, widow, foreigner, and the poor. It also is important to note that official documents of the association provide guidance and direction to the entire profession of occupational therapy and, as such, represent the views of the association, not the views of a few individuals.

### **Conclusion**

It is from numberless diverse acts of courage and belief that human history is shaped. Each time a man stands up for an ideal, or acts to improve the lot of others, or strikes out against injustice, he sends forth a tiny ripple of hope, and crossing each other from a million different centers of energy and daring those ripples build a current which can sweep down the mightiest walls of oppression and resistance. (Kennedy, 1966)

Social justice is clearly not a modern phrase. It is important to consider the history behind the term when defining and examining how it manifests within the profession of occupational therapy today. Writers since biblical days have embraced the concept that we are our “brothers’ keepers.” It is the responsibility of all people to take care of each other; there is plenty for everyone in society.

Healthcare professions have acknowledged this historical context and included social justice in their ethical codes as an aspirational goal. The definition of social justice outlined in the AOTA’s *Code of Ethics & Ethics Standards* is part of this trend, and it is consistent with the original meaning of social justice in many ancient texts and writings.

As our profession moves forward to revise its *Code of Ethics & Ethics Standards*, an attitude of trust is essential. The purpose is to share in the common good and support everyone’s right to be healthy. As the profession of occupational therapy moves forward with the ongoing development and review of our ethical code, it is imperative that the debate is civil, not political, and that it draw upon our moral sensibilities.

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