Doctors and Lawyers: A Comment on the Theory of the Professions

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The current, predominantly functionalist, theory of the professions stresses two characteristics as strategic for the explanation of their position and functioning in society. The professions are conceived of as service occupations that (1) apply a systematic body of knowledge to problems which (2) are highly relevant to central values of the society. Their high degree of learned competence creates special problems of social control: laymen cannot judge the professional performance; in many cases they cannot even set the concrete goals for the professional's work. This means that the two most common forms of social control of work in industrial societies, bureaucratic supervision by virtue of a formal position and judgment by the customer, are of only limited applicability. The need for social control is, on the other hand, especially urgent because of the values and interests that are at stake.

The dilemma is solved by a strong emphasis on individual self-control, which is grounded in a long socialization process designed to build up the required technical competence and to establish a firm commitment to the values and norms central to the tasks of the professional. The values and norms are, furthermore, institutionalized in the structure and culture of the profession. Individual self-control is therefore supplemented by the formal and informal control of the community of colleagues. Accepting the pledge to a self-controlled "collectivity orientation" as trustworthy, so...
ciety grants in return privileges and advantages, such as high income and prestige, and protects the profession's autonomy against lay control and interference. Non-professional competitors, customers, mass media, and especially government agencies exert control too, but the autonomy of the profession is sheltered against them by such means as laws against "quacks," professional referral patterns and norms which restrict certain forms of competition, assistance on exclusive professional competence in judging performance and professional personnel in and professional advice to government agencies.

This structure of social control specific to the profession, at least in its extreme forms, is the focus for a series of interrelated hypotheses explaining other features of these occupations. One example may be sufficient. All professions have norms restricting or prohibiting advertising. This seemingly trivial fact is in various ways related to the outlined fact problem. (1) The restriction of advertising serves to emphasize symbolically the subcultural distinction between the professions and the business world, where, supposedly, monetary success is important in itself and as the main basis for esteem from significant others and for self-respect. (2) Advertising would presuppose that the customer can legitimately make up his mind about the qualities of the various members of the profession. It would give the customer a controlling influence incompatible with the maintenance of high technical standards. (3) Advertising would increase competition among the professionals who under pressure might give in to temptations to deviate from professional norms. (4) The restriction of advertising serves to make the members of the profession concerned with the performance of their "brethren," since it limits the possibilities to excel individually. It thus reinforces other mechanisms that make for identification with the professional community and strengthens collective social control.

The study of the medical profession has dominated this field of sociology and has strongly influenced the development and elaboration of the theoretical model. In this article I shall make some comparisons between the legal and medical professions and attempt to point out modifications of the theoretical model that they suggest.

II

The legal and medical professions differ significantly in the two respects that form the core of the theoretical model under discussion: the nature of their specific competence and the social values toward which the professional work is oriented.

Apart from borderline cases there exists a near-universal consensus about the central value toward which the medical profession is oriented. Physician and patient, the doctor's colleague group and the patient's family, his friends, and his role partners in other contexts, as well as the larger community and its various agencies, agree essentially on the substantive definition of health and on its importance compared with other values.

The situation is far more complex for the legal profession. Justice, like health, ranks high in the societal value hierarchy. In the substantive definition of justice, however, there are considerable ambiguities and wide discrepancies, as well as areas that are clearly understood and largely agreed upon. Certainly, enacted laws and established legal rulings carry the presumption of being accepted as "just," but the notion of unjust law is by no means uncommon.

These different conceptions of justice are not identical with divergent interests. Interests which stand against a given conception of justice may or may not lay claim to a different conception of justice, and the prevalent ambiguity allows for different shadings between. Divergent interests make for a second difference between the legal and the medical profession that is relevant here. While the interests of the attorney's client may be at odds with what the lawyer considers just, it is rare that the patient's interests stand against the attainment of health.

Divergent interests and the different more or less articulate conceptions of justice are not randomly distributed in the social structure. They are associated with various subgroups, particularly different socio-economic strata and ethnic and religious groups. A relatively low degree of over-all consensus may contrast with a relatively high degree of consensus within these subgroups. This constellation of societal values

6 The importance of conflicting interests for the situation of the legal profession is emphasized by Parsons in "A Sociologist Looks at the Legal Profession," Essays in Sociological Theory, 370-85. Parsons' analysis neglects, however, the problem of value dissensus. It is thus implicitly treated as a simple by-product of conflicting interests with no significant consequences of its own.
dissensus and subgroup value consensus also confronts the religious professional, the minister, priest, or rabbi. However, the diversity of religious commitments is, at least in liberal Western societies, established as legitimate while the diversity of conceptions of justice finds only an indirect legitimate expression in the realm of politics. Moreover, the clergymen's work centres in the context of his subgroup, while the lawyer's activity often cuts across the boundaries of subgroups and his primary loyalty is expected to be to an overarching system of value orientations that represents, beyond a clear-cut core, an ambiguous compromise among several influential conceptions of justice.

It may be argued that people act and think only to a very limited extent with respect to ultimate social values. The norms and values that actually guide men are those incorporated in the more immediate institutional arrangements and role expectations. Therefore, conflicting notions of justice, especially if they are vaguely or ambiguously defined and rarely formulated explicitly, and if they are not anchored in specific institutions and organizations, are of little consequence for the structure and functioning of the legal profession.

It would seem, however, that the argument refers chiefly to those ultimate values that are not fully compatible with the requirements of institutionalized social life and for those that function as integrating mechanisms for concretely divergent notions precisely because they are left vague. It should be noted that the value of health falls into neither of these categories, while the generalized notion of justice in an important sense fits the second. But even ultimate values of this kind are not completely without consequence for behaviour. Furthermore, the conflicting conceptions of justice are to some degree associated with interests and anchored in specific groups, organizations, and institutions.

In spite of partial dissensus on the substantive definition of justice, the institutions of the medical and legal professions are similar in a related dimension, and this makes the value dissensus even more consequential. The public exhibits a high degree of concern about the implementation of the central values of both professions. Open neglect or violation of the values of health and of justice, however understood, elicits considerable moral indignation from disinterested third parties.

In this context the emphasis on procedural law that is characteristic of a developed legal profession may be interpreted as a defence against an open clash of emotionally charged conceptions of justice and not solely a safeguard against the emotions, biases, and political violence that grow out of conflict of interests. However, a strongly procedural conception of justice creates at the same time a new source of alienation between the value orientation of the profession and the substantively defined orientations of the different "publics" of the profession.

The technical competence of the physician rests on a body of systematic scientific theory. In the actual application of this knowledge other elements that are less rationalized and may be called the "art of medicine" play an important role, for instance, the art of diagnosing on the basis of vague and insufficient clues, certain manual skills, and the use of interpersonal relations in the healing process. All these are, however, intimately connected with the main area of the physician's competence, medical knowledge.

If we compare the technical competence of physician and lawyer, three important differences emerge.

First, the lawyer's knowledge is not scientific. It is concerned not with the prediction and explanation of events on the basis of natural laws, but rather with a body of social norms and with rules for their application. These norms and rules can be systematized for the convenience of teaching or for avoiding inconsistencies and contradictions. But the resulting body of knowledge remains a description of a single normative system, designed for aiding its application and preparing its further development.

This development again requires comment. Legal norms are, in contrast to natural laws, subject to human decisions. Changes in the body of medical knowledge are due to new discoveries; changes in the body of legal knowledge are due to decisions of legislatures and of courts, decisions significantly influenced by members of the legal profession acting as legislators, judges, counsels, legal writers, and law professors. The value orientation of the legal profession, which is subject to patterned social conflict, thus plays a role in the substantive development of the law, while the content of medical knowledge is largely independent of the value orientation of the medical profession.

Second, a good deal of the lawyer's competence is connected with his legal knowledge only indirectly or not at all. Since the law is a generalized mechanism of social control, its application covers a great variety of social situations. Different applications require a grasp of these social contexts as well as of the law. From the good lawyer we may therefore expect a generalized capacity for defining situations and a great variety of "worldly knowledge." On the basis of this non-legal knowledge and ability lawyers act often outside their specialty, giving economic advice or providing their clients with organizational "know-how." The basic propositions of the theoretical model under discussion do not apply fully to these activities: they are not based on systematic theory, the customer may be in a position to judge them for himself, and society does not imbue them with the same moral significance as strictly legal activities.

Finally, it may be suggested that non-rationalized interpersonal skills play, at least manifestly, a greater role in the lawyer's work than the physician's. His relationship to the client shows significant similarities to the doctor-patient relation-

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I deliberately neglect differentiations inside the legal or medical profession. The most obvious exception to the proposition above would be the corporation counsel who does little or no litigation. But although he maintains a considerable loyalty to the dominant conception of justice, he is by some legal quarters looked upon as a "captive lawyer."
ship but, in addition, interpersonal skills are of extreme importance in litigation and negotiation, major fields of his professional work.

We have seen, then, that in comparison with the medical profession the lawyer's special technical competence, his legal knowledge, covers less of his work, while generalized intellectual skills, various areas of knowledge outside his specialty, and skills in handling interpersonal relations play a more important role. In these non-legal activities the gap in competence between professional and layman may be considerably reduced. The part of the cultural tradition that is the basis of his learned competence is not a body of scientific knowledge, but a system of legal principles and norms, the application and development of which are substantively influenced by the value orientation of the profession. This value orientation is far from clear-cut and, in addition, is subject to societal value dissensus and to the impact of conflicting interests that may be at odds with any given conception of justice. At the same time, the public's concern with the implementation of these variously conceived values is quite intense.

III

Up to this point we have compared the legal and medical professions in those characteristics that are the basic independent variables of the theoretical model, technical competence and the social values toward which the professional work is oriented. We should expect corresponding differences between the two professions in those characteristics that are treated as dependent variables, such as their control. Several such differences may be found.

Ultimate values are important for the legitimation of more specific and concrete normative patterns. To the degree that within a society there is dissensus and ambiguity about the concrete meaning of the ultimate values underlying the specific norms and orientations of a profession, we should expect these values to be seen by the practitioner as less immediately binding and the specific norms to be more often taken as conventional rules the breach of which is of little consequence if "one can get away with it."

Societal dissensus and ambiguity about the central "reference values" of a profession should also strongly influence how the profession is perceived and evaluated by various more or less distant groups. The public image of the legal profession seems indeed to be characterized by suspicions and ambivalences. These are reinforced if the legal profession is seen as linked to certain social classes or religious and ethnic groups and if the most visible work of the profession is concerned with conflict situations and the defence of mentally suspect or already condemned persons. Deprecatory elements in the public image of a profession will probably reduce the identification with the profession and its solidarity as a group, unless it is united by very strong common value orientations and interests.

With reference to the norms and values that are incorporated in institutional patterns and role expectations of immediate concern to lawyers, a full analysis would have to investigate the total role set and the reference groups for the various segments of the legal profession. In assessing the balance of social control in these relationships, the relative level of competence of lawyers and their role partners would require special consideration. Such analysis will have to await the accumulation of more empirical evidence. It seems possible, however, to indicate some of the consequences for the profession as a group that grow out of the relationship between lawyers and their clientele.

Professional services are extremely costly. Therefore, although nearly every profession holds up the ideal of serving all segments of the population, the middle and upper classes are more strongly represented in the clientele of self-employed professions than the lower classes, unless tax or charity funds supply the professional fees. Compared with the medical profession, this tendency is reinforced in the legal profession by three factors: first, the incidence of problems defined as legal tends to be higher in the middle and upper classes; second, the elasticity of demand for legal services is greater than for medical services; third, tax and charity funds tend to be more generously supplied for medical than for legal problems. This situation structurally shields the legal profession against the full impact of the dissensus about relevant values while associating it more closely with the middle and upper classes.

The clientele of a profession is distributed differentially among its practitioners. In addition to technical specialization, and often connected with it, we find a tendency toward specialization in clients and patients of a particular ethnic and class background. Although the general class range of

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8The research of Jerome E. Carlin on New York lawyers will contribute significantly to such an analysis; cf. his preliminary report in "Social Control in the Legal Profession," a paper presented at the annual meetings of the American Sociological Association in Los Angeles, August, 1963.

9In 1958, nearly three-quarters of all families in the United States had annual incomes between $500 and $2,500, with an average of $1,500. These families paid on the average 6% for health and less than 1% for legal services. Plainly, lawyers were getting their pay in most cases out of the price of professional services. "Plainly, lawyers were getting their pay from the highest-income groups, including only about 13 per cent of the families in the United States. The mass of the people had practically no contact with the lawyer in a client relationship." James Willard Hurst, The Growth of American Law, (Boston, 1950), 255. This book is of considerable value for general information about the legal profession in the United States; cf. also Albert P. Blaustein and Charles O. Porter, The American Lawyer: A Summary of the Survey of the Legal Profession (Chicago, 1954). Some of the recent sociological studies on the legal profession are cited in note 13.

10Examples outside the legal profession would be the role of the specialist in internal medicine as the general practitioner of the upper middle and upper classes, and the clienteles of psychotherapy.
the legal clientele is narrower than the class range of medical patients, certain factors seem to strengthen the trend toward specialization in terms of client background for the legal profession and to lend special significance to such a differentiation of the clientele. There is, first, a rough connection between the class position of clients and the legal character and difficulty of their problems. Furthermore, not all lawyers are trusted with problems the adequate solution of which, in the eyes of the client, not only requires legal competence but a certain set of attitudes and value orientations. Finally, the non-legal competence of the lawyer, especially his interpersonal skills, is highly class specific: for example, skill in negotiating with executives is quite different from competence in handling minor officials in local administration.

Association with clients of a particular social class or ethnic background not only seems to be more characteristic of the legal than of the medical profession; it also has more significant consequences for the lawyer than for the physician. Among the factors that give special significance to this differential association are divergent interests and conflicting conceptions of justice and the fact that, compared with scientific knowledge, "secular law is considerably looser in its points of reference" which could provide a stable orientation when facing pressures from clients. Furthermore, clients will probably attempt to exert such pressures more often than patients, and they are often in a better position to do so: their health is not impaired; their education, to a high degree associated with class position, is better than average; their own occupational competence is often related to the issues at hand, and if the lawyer does not confine himself completely to strictly legal matters the gap in competence between client and lawyer may disappear completely.

One last difference between the medical and the legal profession may be mentioned in this context. The doctor's patients are, with some modifications, individual persons, while the lawyer's clients are very often formal organizations. Organizations provide more recurrent business than the average individual client or patient and they can often, especially if they have their own legal staff, check on the lawyer's performance. They are, in addition, in multiple and complex ways linked to other organizations with similar legal problems. Organizational clients exert, therefore, a more powerful social control over the practitioner than individual clients or patients do. Their large share in the lawyer's business further reduces the importance of the gap in competence between professional and client.

Parsons, "A Sociologist Looks at the Legal Profession," 376.

That the lawyer's clients often are organizations has many other implications which cannot be discussed in this article. One point brought out in a discussion with Arnold Feldman, modifies the propositions above. The work of important segments of the legal profession is associated with managerial mox of power. To the extent that a definition of the managerial role as the role of a relatively independent fiduciary for the interests of shareholders, employees, consumers and the larger community gains in importance, the

These factors lead to an internal stratification of the bar in terms of income and professional esteem; this is found in other professions too, although probably to a lesser extent. They also expose the various segments of the bar to powerful influences from different client groups with their characteristic interests and value orientations, thus creating pressures to deviate from the traditional orientation of the profession or to emphasize and deprecate selectively certain elements of the professional ethos.

A differentiation of the bar in terms of different client milieux that partially determine the attitudes and value orientations of lawyers will place considerable strain on professional solidarity. It will reduce identification with the profession as a group13 and severely limit the possibilities of the social control, informal as well as formal, that the profession is supposed to exercise. It also will impede the moral commitment of the profession to values that transcend the lawyer-client relationship and its attendant virtues.

These tendencies could be counterbalanced by a strong internalization of common value orientations in the process of socialization toward the professional role. In the United States the socialization of lawyers shows considerable variation, and this heterogeneity is tied with the societal class structure on the one hand and the internal stratification of the bar on the other. Ethnic origin and class background are varied and show a high correlation with length and quality of pre-law schooling, type and quality of legal education, the incidence of non-legal jobs as part of the work career, and, finally, the type and status of legal practice.14 The structure segments of the profession would be under less one-sided pressure and in a better position to assert their own professional orientation.

Together with a stronger backing by a more established legal system and a possibly better bargaining position of large law firms resulting from differential growth rates of law firms and client firms, this tendency could explain why the corporation lawyer in the United States is a professionally better respected figure than he was around the turn of the century.

A factor that may limit this tendency is the ignorance which stems from a near-complete segregation of several segments within the profession. It seems that lawyers in the upper brackets of the stratification system often are only dimly aware of the existence and the condition of the lowest strata.

of recruitment and socialization is not simply a consequence of the special features of the legal profession which have been discussed. It is largely due to the general structure of higher education in the United States and to the specific time at which formal legal education was institutionalized in the United States. It is, on the other hand, not unrelated to a professional tradition that is ambiguous to begin with and is subject to divergent influences from clients and other reference groups and to a professional competence that includes a good many non-technical elements which are largely subcultural and class-specific. Once developed, the heterogeneity of professional socialization is reinforced by the heterogeneity of the profession itself.

Although this analysis has been developed on the basis of American materials, the distinctive characteristics of the legal profession presented here are not confined to the United States and its legal, economic, and political system. The incidence and their implications vary considerably, however, according to different societal conditions.

1. Societies differ in the incidence and intensity of conflicting interests and in subcultural differentiation. To the degree that a society shows less patterned conflict and value disensus the hypotheses derived from disensus about justice should apply less.

2. Radical social change upsets legitimate arrangements and requires complex innovations in the legal system. The area of substantive consensus is reduced and the system of legal norms is probably more subject to the impact of contending notions of justice and of conflicting interests than an established legal order of long standing that meets more or less standardized legal problems. The profession or significant parts of it are more subject to divergent pressures while the cultural reference points are at the same time more fluid and ambiguous.

3. Cultural and political traditions differ in dealing with social conflict and value disensus. If, for instance, we compare schematically the dominant cultural definitions in nineteenth-century Prussia and nineteenth-century America, we see on the one side a conception of justice and the common good as determined by a priori solutions to be found and formulated by experts and a rather low level of tolerance of conflict and disensus, and on the other a conception of justice and the common good as determined by ordered dispute and compromise and a rather high level of tolerance of conflict and disensus. These different cultural and political traditions rest, of course, on structural conditions, contemporary and antecedent, among which are the position and structure of the legal profession, as Max Weber has shown. At any given time, however, they are relatively independent of the legal profession and determine the socio-cultural situation in which the legal profession has to operate. These differences pervade the whole legal system: the system of legal norms, the administration of justice, the political and legal position of government bureaucracy, the role of law professors as quasi-legislators and quasi-judges, as well as the dominant attitudes in major client groups and in major sources of public opinion.

To the degree that the dominant cultural definitions and social institutions shelter the legal profession from the impact of conflict and value disensus, and create the fiction of law as being derived by scholars, the hypotheses about the consequences of value disensus and the non-scientific character of legal knowledge would have to be modified considerably.

4. The gap of competence between layman and lawman depends on the relative legal competence of lawyers and their various role partners as well as on the importance of non-legal skills in the lawyers' role performance and the relative skill in these respects of lawyers and their role partners. All the factors involved, such as complexity of the system of legal norms, most prevalent types of client, their legal and non-legal competence, and extension of the lawyer's role performance into non-legal areas, are subject to conditions that vary greatly from society to society; important variations occur even between industrial societies which show considerable similarity in their economic and occupational structure.


15This institutionalization dates back only to the turn of the century. Rapid urbanization and a large influx of immigrants increased the heterogeneity of the potential recruits of the bar. The proportion of night school students rose from 10 per cent to nearly 50 per cent in 25 years, while for other reasons large law firms began to develop which recruited their lawyers increasingly from the legal schools in the country. Cf. Hurst, The Growth of American Law and Carlin, Lawyers on Their Own, for a convenient survey of the relevant sources.

16Attempts to raise the level of legal education met with much stronger resistance than similar efforts in medical education. One frequent argument pointed directly toward value disensus: the quasi-political character of the profession makes a relatively open access to it desirable, and this consideration outweighs the disadvantages of night schools and similar low-cost institutions. Cf. Albert J. Harno, Legal Education in the United States (San Francisco, 1953).

17It would be instructive to analyse from this perspective certain features in the historical development of the legal profession in the United States. The hypothesis may explain partially the increased independence from client pressures that now seems to prevail in large law firms dealing with big business clients, compared with their situation around the turn of the century. The relatively stabilized legal situation of big business in the post-New Deal period has interacted, according to the hypothesis, with the development of a better bargaining position of large law firms on the market for highly competent legal services and the embryonic emergence of a fiduciary definition of the business executive's role to result in fewer conflicts of orientation in the lawyer-client interaction and better possibilities for resistance on the part of the law firm (cf. note 13). For material on the position of the large law firm in various periods, see: Joseph Katz, The Legal Profession, 1830-1935: The Lawyer's Role in Society: A Study of Attitudes, unpubl. M. A. thesis, Columbia University, 1953; Robert T. Swaine, The Growth Firm, three vols. (New York 1946-53); R. T. Swaine, "Impact of Big Business on
IV

What are the implications of these comparisons of the legal and the medical profession for the model underlying much of current sociological thinking about the professions?

With respect to those variables the model treats as independent, three distinctive aspects of the legal profession have been emphasized. (1) The body of systematic knowledge does not have scientific character. (2) The values to which the profession is committed are subject to societal dissensus and patterned conflict of interests. (3) Various factors tend to reduce the gap in competence between the lawyer and his role partners.

The first two points are not taken into account by the original model, although what is currently known and surmised about the legal profession suggests that they do have significant implications for the model’s dependent variables. The third point places the legal profession relatively low in one of the essential dimensions of professionalism. The model states more or less clearly certain consequences for this case. To the degree that they are not fully borne out, the question arises whether other factors have to be considered as functional equivalents for the independent variables of the model.

Neither these specific initial points nor their implications can be confined in any sense to the legal profession. To a greater or lesser degree they are relevant for other professions, including medicine. Several suggestions for a revision of the model may be stated as “general orientation” rather than as specific hypotheses.

1. The model under discussion does not differentiate enough between different types of knowledge; it overemphasizes the role of scientific knowledge and its attendant consequences, such as rationality and readiness for change. Among the classical professions, the emphasis fits neither the legal profession nor the ministry, and the military profession only to a limited extent. It does fit many of the new professions which grew up during industrialization; but their growth did not provide substitutes for the professions without a scientific base nor did it transform them into a similar pattern.

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If we, in turn, focus our attention on normative and evaluative elements in the “knowledge” base of all professions and semi-professions, we discover that knowledge about norms, evaluative definitions of situations, and metaphysical assertions play a more or less important role in many of these occupations. Thus, what constitutes health and how it may be achieved seem to depend much more on non-scientific assumptions in psychiatry than in medicine, although the line between the two is becoming more and more blurred.

2. Much has been said about a neglect of dissensus and conflict by “functionalist” theory; often, the criticisms are oversimplified and the proposed alternatives show even more neglect for other dimensions of social reality. The model of the theory of the profession, built as it is on the paradigm of medicine, assumes a high degree of societal and intraprofessional value consensus. In the legal profession such a societal consensus is combined with dissensus about the substantive definition of important aspects of what is required by justice. In addition, we find strong conflicting interests that may be at odds with any of these conceptions of justice.

It is suggested that focusing explicit attention on divergent and possibly conflicting value orientations and interests would be profitable for the study of all professions, including medicine. The analysis should be more differentiated and go beyond the general concepts used above, like the values of “health,” “justice,” or “order.” The character of relevant value orientations, that is, the substantive definition and relative ranking, the intensity of moral sentiment and the concern for implementation, the relationship to interests, ambivalent elements, has to be identified for various groups and subcultures that are important for the profession as recruitment fields, socialization environments, actual and potential clientele, sources of public opinion, and supervisory and control agencies. The impact of these various orientations and

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Lawyers often refer to the conservatism of their profession and explain it by pointing to the element of tradition inherent in any system of legal norms and especially in those of the Common Law type. It seems doubtful, though, whether such an hypothesis of the lawyer’s “immanent conservatism” is correct. Attorneys played an important role in liberal revolutions and bourgeois modernization and reform movements and in the attendant legal changes. It may be suggested that progressive or conservative attitudes in the legal profession are largely an outgrowth of the attitudes of clientele rather than an outgrowth of commitment to a body of knowledge and its furtherance. For a suggestive example from a non-Western society that fits this interpretation, see Richard William Rabinowitz. The Japanese Lawyer: A Study in the Sociology of the Legal Profession, unpubl. Ph.D. diss., Harvard University, 1955.

The cultural predominance of the sciences did result in legal and theological movements that interpreted themselves as scientific. These were, however, based on misunderstandings of what science is or they developed into auxiliary disciplines such as the sociology of law and religion.

Rue Bucher and Anselm L. Strauss emphasize in “Professions in
interests on the profession can be analysed largely in terms of existing middle-range theories about role, role set and role strain, reference groups, and deviant behaviour.

3. The third characteristic more clearly seen in the legal profession seems easiest to deal with in terms of the theoretical model. If the gap in competence between the lawyer and his role partners is in various ways and degrees reduced, then members of the legal profession simply score low on one primary characteristic of the ideal-type of a profession. The situation seems to be similar to that of librarians, social workers, and other semi-professionals. One would expect this to result in their being granted less autonomy as well as lower rewards in income, prestige, and respect. The expectation seems to be borne out for some segments of the bar, especially the metropolitan solo practitioner in the United States; it is clearly not confirmed for the higher strata of the legal profession. It may be suggested that these last groups of lawyers score high in the dependent variables of the model in part because of their affiliation with the highest segments of the societal stratification system, that is, for reasons that lie outside the model of professionalism.

This point may be generalized. The core of the theoretical model is identical with the assertions used by the professions to legitimize their claims for maintaining old and acquiring new privileges. It seems likely that the structure of legitimation is only a part of the causal matrix underlying the pattern of professionalism. The advantages of a recognized professional position seem attractive enough to mobilize all means of power, prestige, and ideology for the acquisition or maintenance of that position, whether legitimate or not. The differential access to these means, however, is strongly influenced by factors other than specialized expertise and importance for core values of a society. One should avoid being misled by the collectivity-oriented self-definition of the professions into separating their analysis from the analysis of social stratification. Many features that are considered specific characteristics of the professions seem to be in fact aspects of upper-class and upper-middle-class life and subculture. Thus, autonomy at work and many facets of professional ethics seem buttressed not only by professional norms and granted claims, but also by the class status of the practitioner, his social origin, and the class positions of his clients and his other role partners.

Process," *American Journal of Sociology*, LXVI, 1960/61, 325-34, diversity and conflict of interests within a profession against the model of functional theory. They conceive of profession as congeries of "segments" with distinctive identities and divergent interests which tend to take on the character of social movements within the larger profession. This conception is illustrated with suggestive examples from the American medical profession.

The relationship between such internal conflict and dissensus about the orientation toward a profession's central values in other segments of the larger society is presumably quite complex. As one hypothesis it may be suggested that the incidence of organized intraprofessional segmental movements is inversely related to the degree of dissensus in the various publics relevant to the profession. In an "embattled group" internal factionalism is less likely to emerge openly and to be tolerated.

31Cf. Goo e, "The Librarian: From Occupation to Profession?"