

By Dr Toh Han Chong, Editor



## They Shall Run and Not Be Weary

One of my favourite films of all time is *Chariots of Fire*, produced by David Puttnam and the late Dodi Al Fayed, about two British athletes, one Christian and one Jew, who both aspired to become “The Fastest Man on Earth” at the 1924 Summer Olympic Games in Paris. While both men sprinted towards the same goal, they were motivated differently.

Harold Abraham, a Cambridge law student charged with neurotic intensity, a fear of failure and a yearning for acceptance, was Jewish, with a huge ethnic chip on his shoulder in potato-eating, deeply Anglo-Saxon England. In a move unprecedented for its time, he hired a professional coach, London-born Arab Sam Mussabini, to enhance his performance in his pursuit of an Olympic gold medal. This was considered a slippery slope in then conservative Cambridge.

Eric Liddell, the China-born “Flying Scotsman”, believed that God made him fast and was inspired to run for the Olympic gold medal for the glory of God. As destiny would have it, the Olympic 100-metre heats were held on a Sunday. It was against Eric Liddell’s Christian principles to run on the Sabbath, and he declined to take part, losing his chance for the 100-metre gold medal. In a magnanimous gesture, Lord Linsey offered

his place in the 400-metre finals to Eric Liddell.

In fairytale style, Harold Abraham won the 100-metre gold medal and Liddell won the 400-metre gold medal.

Today, sports at the highest level has become tainted by the use and abuse of performance-enhancing drugs that distort natural human metabolic processes in the name of excellence and potentially humongous monetary rewards. Is this a case of a lesser evil for a greater good or short term gains for long term pains?

In the 20 June 2008 issue of the journal *Science*, Samuel Bowles argues that public policies designed to incentivise citizens’ instincts for self-interest, even for the goal of the common good, may degrade intrinsic motivations, undermine individual moral values and the citizen’s ability to act altruistically.

Richard Titmuss concludes in his classic work, *The Gift Relationship* (1970), that “commercialisation of blood and donor relationships represses the expression of altruism”. Titmuss’ study debunks the neo-classical economics premise that human blood can be regarded as an economic good, that paying donors for blood would increase supply, and that increased supply and demand would be provided at a cost advantage eventually.

Instead, paying for blood donation turns out to be economically very wasteful, a bloody big bureaucratic burden, has led to a huge jump in cost of buyable blood, and commercialisation of human blood donation is more likely to distribute contaminated blood.

The issues and controversies of organ trading and kidneys-for-sale are raised in the President's Column and also by *The Hobbit*. At the heart of the matter is whether it is right for a vital, fully functioning, non-regenerating organ of the human body to be sold and bought as a commodity.

Yes, we all have two kidneys. Yes, some very poor person who sells his or her kidney can be lifted out of the economic sewers. Yes, a patient with end-stage kidney failure could benefit unequivocally from the kidney. However, two kidneys are better than one, and all human life must be valued and not exploited.

Poverty can and must be solved by other means, even if good government is not availing, such as microfinancing and through global initiatives aimed at improving public health, education, technology-empowerment and job creation. As economic woes beset the world, legalising organ trading may tempt many more desperate, poorer people, including more Singaporeans, to consider selling their kidney for money.

Nephropathy-inducing diseases such as diabetes, hypertension and nephritis have benefitted from basic and clinical research that give rise to better predictive biomarkers of disease, improved drug therapies, better disease control and expanding public education. These strategies continue to improve and save more lives. In addition, examples of behaviour economics suggest that the creation of financial incentives that appeal to self-interest reduces the sense of compassionate giving and intrinsic motivations in the community, which will overall have a long range negative impact on society.



Human beings do enjoy giving, be it a virtual hug on *Facebook* or a pelvic-punching bone marrow graft harvested under general anaesthesia for a complete stranger halfway across the world. The strongest testament to Singaporeans' sense of giving which defied market norms was when the country faced SARS and inspired examples of volunteerism and great sacrifice shone through.

Moving to the broader scope of healthcare, even Singapore's efficient 3M health funding framework faces deeper ulcerating pressure points during such tough financial times coupled with rising health inflation. Wage stagnation, a real problem for many local households in the last few years, can build up toxic effects such as frayed social cohesion, poorer health outcomes and economic oliguria. Broadening the social compact between the Government and the people might then assume a pragmatic rather than ideological dimension.

In Tim Harford's *The Undercover Economist*, he raises the idea by Nobel Prize-winning economist Kenneth Arrow of coaxing peak performances without handicapping the best performers or interfering with the free market. Using the example of the 100-metre race, he argues that by placing the starting blocks of the weaker runners ahead of the original baseline starting blocks, all manner of runners will perform at their best and hit the finish line at the same time. Hence by selective subsidies, all performers can still maximise their efforts.

In this regard, increasing top-up to Medisave or expanding drug subsidies for subsidised care can increase access of the lower waged Singaporeans to better healthcare. Such public policies will strengthen the fabric of society, even if not all human beings are economically cut from the same cloth.

And finally, do we want the oral history of Singapore, as defined by the Hokkien *kopi tiam* uncles with hairy moles, to describe a country that is *kiasu*, *kiasi*, *kia-jeng-hu*, (*kia-bor* is more of a Shanghainese quality) and *kia-kidney-kenah-ketok?* ■