

An Introduction to Health Ethics¹



What is Ethics?

Ethics is the study of how human beings treat each other and the natural environment; it is the systematic examination of the attitudes and behaviours of people. Ethics is about carefully studying the values that actually do guide our attitudes and behaviours in given contexts, and it is about exploring what values ought to guide our attitudes and behaviours.

No matter what our social, cultural, economic or professional backgrounds are, we are all in the business of practicing ethics on a daily basis. We have certain values (things we think are important for their own sake) and beliefs (views about the nature of existence and the way we understand the world to be). For example, many of us think individuals should not be penalized for wrongs that are not of their doing. This suggests that justice or fairness is important to us. Many of us also feel that we should help those less fortunate in our society. This may suggest a belief that human beings are interconnected and that we hold values such as charity and generosity.

What is Health Ethics?

Health ethics is the branch of ethics that deals with ethical issues in health, health care, medicine and science. It involves discussions about treatment choices and care options that individuals, families, and health care providers must face. It requires a critical reflection upon the relationships between health care professionals and those they serve, as well as the programmes, systems, and structures developed to improve the health of a population. Health ethics involves deliberating about the allocation of resources, and reflecting on the complex moral choices arising from ongoing health care restructuring and advancing technology. It also entails a critical, political, and ethical analysis of the definition and the determinants of health.

A few specific examples of health ethics issues include:

- Making decisions about end-of-life care
- Determining whether to allocate funds to the treatment of disease or the promotion of health
- Critically examining the discrepancies in health status between populations and our ethical obligations to ensure equitable access to health services
- Ensuring ethical conduct in health research
- Deliberating upon the ethical implications of genetic cloning technology

¹ Adapted from “What is Health Ethics?” by the Provincial Health Ethics Network, Alberta

Types of Ethics

Descriptive Ethics

The aim of descriptive ethics is to depict and clarify moral opinions and practices, and to explicitly articulate the concepts and assumptions implicit in these. For example, “What does group X think about the morality of abortion?” is a question of descriptive ethics.

Normative Ethics

Normative ethics concerns making moral judgments about what is right and wrong, good and bad etc. It also involves developing action guides to direct ethical behaviour. For example, “Is aborting a fetus ethically justifiable?” is a normative question.

Meta-Ethics

The discussion here is not about what particular people think ethics is or what ought or ought not to be considered ethical. Rather, meta-ethics involves analyses of the language, concepts, and methods of reasoning in health care. For example, “What does ‘ethically justifiable’ mean?” is a meta-ethical question.

Some Theoretical Concepts in Ethics

Consequentialism

According to consequentialism, the right course of action is determined by examining the consequences or outcome of an action and selecting the one that produces the greatest good. Thus, no action is in itself right or wrong - it is the action’s consequences that determine whether it is right or wrong. One consequentialist theory is utilitarianism, which defines the greatest good as happiness. Using a utilitarian approach to an ethical dilemma, one would choose the course of action that will produce the greatest happiness for the greatest number of people. Critics of utilitarianism highlight the difficulty of measuring happiness and accurately predicting the consequences of one’s actions. They also point out that one could potentially sacrifice the happiness of the minority for the happiness of the majority.

Deontology

According deontology, or duty-based ethics, the right course of action is that which is consistent with one’s moral duties. According to Immanuel Kant, the theory’s most well known proponent, one of these duties is to never use another person as a means to one’s own ends. Additionally, before making a decision, one should think about whether it would be reasonable for everyone to act in the proposed way. If it is indeed reasonable to “universalize” a course of action, then one can deem that act to be ethical. According to deontology then, an action itself has features that are distinct from the action’s consequences, and that make the action right. One critique of Kant’s deontology is its rigidity in abiding by these rules despite the potential consequences of one’s actions.

Virtue Ethics

Unlike consequentialism and deontology, virtue ethics does not focus on rules, consequences or principles to determine ethical behaviour. Instead, the emphasis is on one’s character and what kind of person one ought to be, which are defined by our traditions and communities. Critics of virtue ethics question the emphasis on tradition and community, given that our world consists of a mosaic of cultures and ethnicities. That is, it is problematic to achieve a

common morality derived from so many traditions and communities. Additionally, critics sometimes argue that virtue ethics does not provide sufficient guidance on how to act in difficult situations.

Relational Ethics

Relational ethics understands the individual not as autonomous and independent, but as a relational, interdependent being, and emphasizes relationships as integral to human existence and consciousness. Nel Noddings' defines "ethical caring" not in terms of one person naturally caring for another, but one person caring for another because they believe it is the right thing to do. Noddings "care ethics" rejects the need for universal principles for behaviour, arguing that a care decision must be made in the context of the particular relationship. Although relational ethics is recognized as a feminist ethics, some have criticized it for reinforcing traditional stereotypes of women as caregivers. Others have argued that relational ethics is too ambiguous and contextual and doesn't offer concrete guidance for ethical action.

Principlism

Much of contemporary Western bioethics is founded upon or makes reference to four principles outlined by Tom Beauchamp and James Childress in *Principles of Biomedical Ethics*². These principles are rooted in a combination of consequentialism and deontology, and assume that humans have some basic moral beliefs that can provide a good starting point for ethical guidance. From these basic beliefs, Beauchamp and Childress have outlined four principles to guide behaviour:

Respect for Autonomy

Respect for Autonomy is based on self-determination and the right of individuals to make independent and informed decisions concerning their life, well-being and best interest. Within the context of autonomy arise issues such as privacy, confidentiality and informed consent.

Beneficence

Beneficence, or doing good, involves promoting another's welfare, acting in an individual's best interest and in a manner which benefits others.

Non-maleficence

Non-maleficence requires one to do no harm and to protect others from harm. This also includes the duty to maintain professional competence and to be aware of the isolation and powerlessness of others.

Distributive Justice

The principle of justice entails that all persons in society are of equal moral worth, thus should be treated with fairness or equally under similar circumstances.

² Beauchamp, T.L. & Childress, J.F. (2001). *Principles of biomedical ethics*. New York: Oxford University.