Ethics, Virtue and Professionalism—An Overview

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Main Topics

- **What is ethics all about?**
- **What sorts of *conversations* produce ideally ethical behavior?**
- **What's the relationship between *ethics* and *professionalism* (virtue)?**
- **What tensions characterize the effort to become an ethical and virtuous physician?**

Ethics

- **"Deliberation and explicit arguments to justify particular actions"**
- **"Principles governing ideal human character"**
- **Focus on *reasons why* an action is right or wrong**
- ***For practical purposes*, ethics = morals**
  - Lo, p. 5

Ethical dilemmas not resolved by:

- **Emotional reactions to case**
- **Personal moral values**
- **Claims of conscience**
- **Claims of rights**
  - Lo, pp. 3-5
- **Law**
- **Appeals to particular religious teachings**

Model for Ideal Ethical Conversation

- **Based on experience with hospital (institutional) ethics committees**

- **Currently, most widely recommended practical method for dealing with ethical concerns and disputes in health care settings**

How Does a *Good* Hospital Ethics Committee Try To Resolve an Ethical Case Dilemma?

Productive Moral Conversation

- **Includes people of diverse backgrounds (personal and professional)**
  - **Diversity eagerly sought, not merely tolerated**
- **Lays as many ethical considerations as possible on the table**
  - **No decision reached until the "quiet people" have spoken up**

Productive Moral Conversation (II)

- **Ethical considerations are critically weighed for pertinence to case at hand**

- **Often reason by analogy: have we been successful with similar cases in past?**

- **Appeals to rules and principles (e.g., patient autonomy) are tools of inquiry, not rigid formulas**

Productive Moral Conversation (III)

- **Basic moral value,** *respect for others* **modeled in process as well as in outcome**
  - **Ideas others put on table are critically challenged and questioned**
  - **Questioning is done** *without* **suggesting disrespect for the person who holds differing moral views**
  - **The person who disagrees with you is your best resource in discovering moral truth**

Integrity Preserving Compromise

- **Commonly used process for resolving moral disputes in pluralistic settings**

- **Distinguishes two senses of compromise:**
  - **Giving up my moral integrity by abandoning my core moral values**
  - **Agreeing to a practical course of action that coheres only in part with my deeply held moral values**

Integrity Preserving Compromise (II)

- **Recognizes that in real world we cannot simply "fire" those with differing views**

- **Recognizes that we value high-quality patient care, which requires that many people of diverse moral backgrounds all agree to cooperate**

- **Values of civil discourse, cooperation, mutual respect *as important as* values on what should be done**

Example from Course

- **How should Ob-Gyn residency programs handle training in abortion techniques?**
- **We *will not* have a debate on whether abortion is right or wrong**
- **We *will* discuss how residents and faculty with diverse views on the morality of abortion could agree upon an acceptable policy**

Professionalism and Ethics– The Same or Different?

Professionalism

- **Competence**
- **Honesty**
- **Compassion**
- **Respect for Others**
- **Professional Responsibility**
- **Social Responsibility**

Ethics and Virtue

- **The CHM list of professional behaviors describes a set of *virtues* of the good (student) physician**

- **How does *virtue* fit in with *ethics*?**

Two Ethical Questions

- **What ought to be done in this situation, all things considered?**
  - **"Snapshot ethics"**
  - **Main focus of HM 546 ethics module**
- **How ought I live a life of moral excellence in my chosen profession?**
  - **"Video ethics"**
  - **Main focus of professionalism curriculum**

What Are Virtues?

- **Excellences in human behavior**
- **Represent core moral values**
- **One tries to live a life so that one's daily behavior exemplifies those core values**
- **"Obituary test" (inherently biographical view)**

Example: Compassion

- **Core personal and professional value (defines ideal physician)**

- **What would the *ideally compassionate* physician do in this situation?**

- **How would the *ideally compassionate* physician go about living a life with medicine as a chosen career?**

A Famous Musician

- **"If I don't practice for one day, I know it. If I don't practice for two days, the critics know it. If I don't practice for three days, the audience knows it."**

- *"Fine discernment" and virtue*

Fine Discernment

- **Virtue ideally involves doing the right thing, in the right way, for the right reasons, with the right attitude**

- **Like becoming a music virtuoso, achieving optimal virtue is a life long project**

- **Irony: The more virtuous one is, the better one can detect even slight lapses**

Compassion

- **Response to the fellow human who is suffering**
- **Beginner: "Oh, don't worry, it can't be that bad"**
- **Responds to *my discomfort* at other's suffering**
- **Challenge: To appropriately be present with the suffering person, appropriately vulnerable to their suffering, while remaining whole oneself**
  - **Requires extensive experience and practice**

Compassion, cont.

- **Conscious and unconscious elements**
- **Conscious: wish to reflect carefully on what compassion is and why it is important (e.g., why not "sympathy"?)**
- **Unconscious: I wish in the future to respond *automatically* to a new situations as a compassionate person would**
  - **Goal: To be compassionate even when I'm having a bad day**

Important Concepts

- **Ethics**
- **Virtue**
- **Integrity (= wholeness)**

"Three-Legged Stool"

- Proposed model to describe typical moral tensions that arise in trying to live a life of integrity in medicine

A Traditional Argument

- **The physician's *professional and social responsibility* is solely and completely determined by one ethical role– serving as a single-minded advocate for each individual patient**

The Virtuous Physician
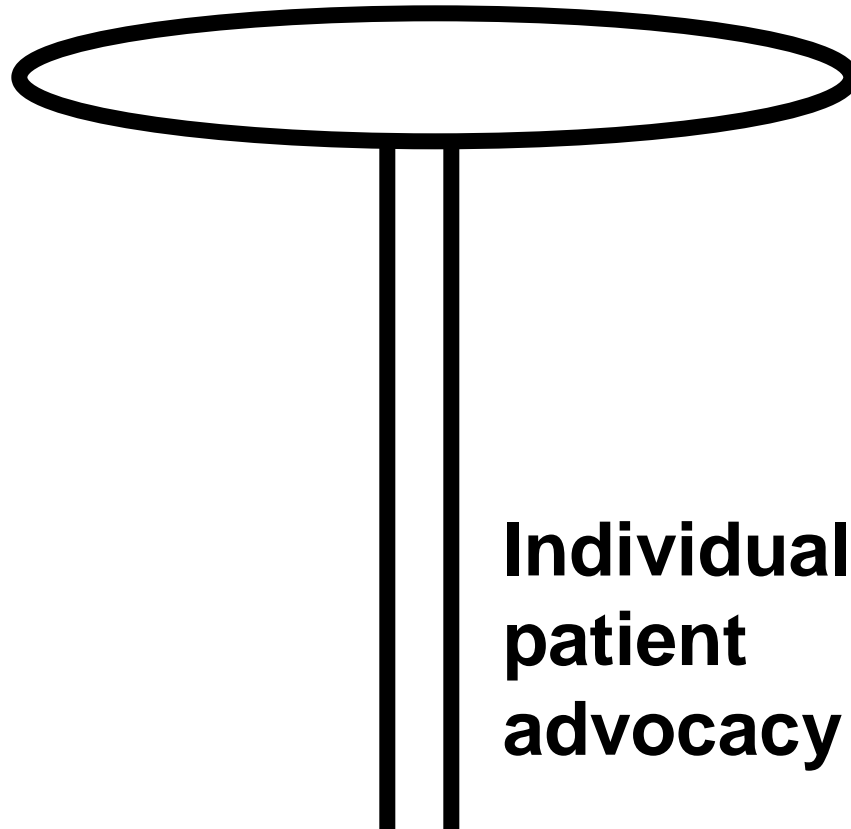
Individual patient advocacy

Medicine's Future

- **Resources will be limited and some system of rationing will be needed**

- **Physicians will increasingly be held accountable for how they spend other people's money**

Newer Argument

- **Physicians cannot be completely ethical merely by being advocates for individual patients; they must advocate for all patients collectively by concerning themselves with the prudent allocation of limited resources**

The Tension: The Physician as--

Loyal patient advocate ⟷ Prudent allocator of limited resources

The Virtuous Physician

Individual patient advocacy

Advocate for population of patients
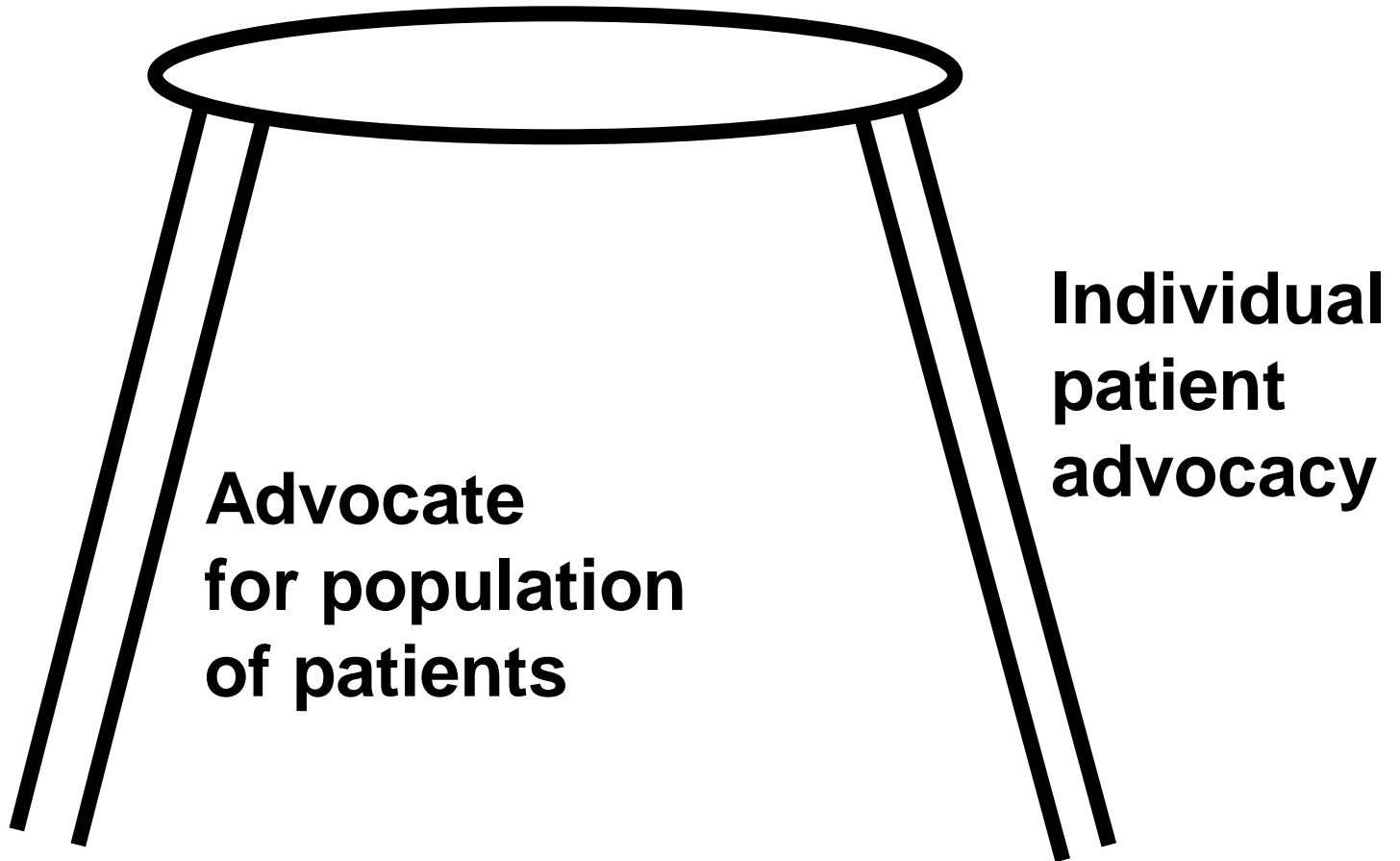
Example: Time Spent with Each Patient

- **Complaint: Managed care forces the physician to rush patients through too quickly**

- **Does the managed care contract require limitations of time per visit?**

- **Or must the physician see more patients faster *if he/she wishes to maintain a certain level of income?***

[I]f the providers can somehow insist upon driving Cadillacs, then a given [health care] budget set aside by society…will make available to patients fewer real health services than would be available if providers could be induced somehow to make do with Chevrolets.

--U. Reinhardt, Milbank Q 1987

Patient Advocacy?

- **Suppose your patient needs another $60K to be able to afford a liver transplant**

- **Suppose you have $60K set aside as a college fund for your 12-year-old**

- **Are you *obligated* to give your patient this $60K?**

  - **How do one- and two-legged stool models answer this question?**

The Virtuous Physician

Advocate for popu-lation of pa-tients

Individual patient advocacy

Reasonable self-interest
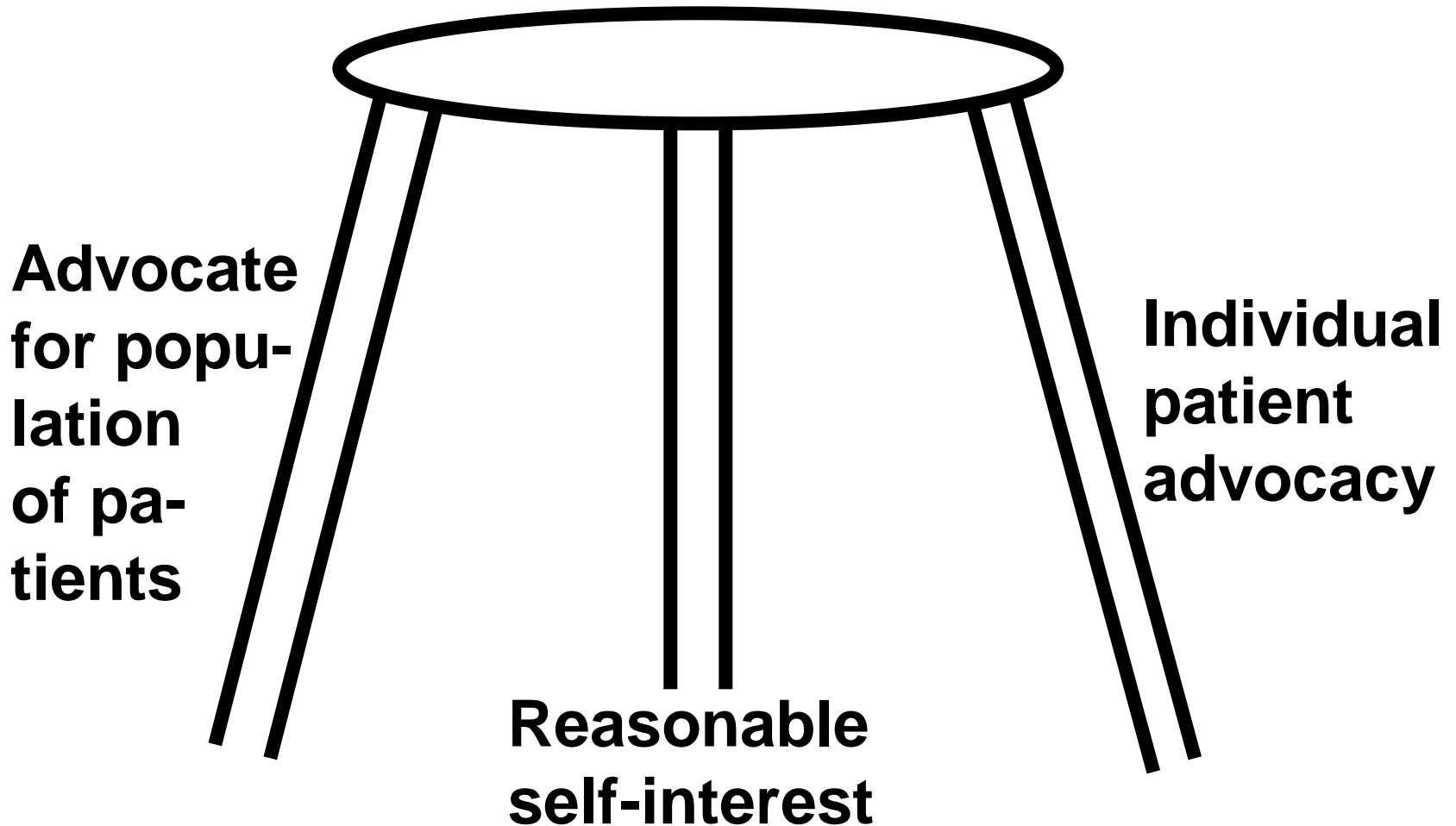
"Three-Legged Stool"

- **Argues that to live a whole life, one has to consider one's own personal interests as being in some sort of reasonable balance with competing interests**
- **Ignoring these tensions seems to portray medical ethics in an unrealistic light ("Sunday sermon")**
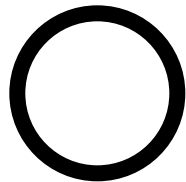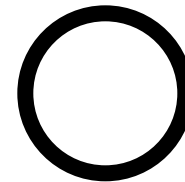
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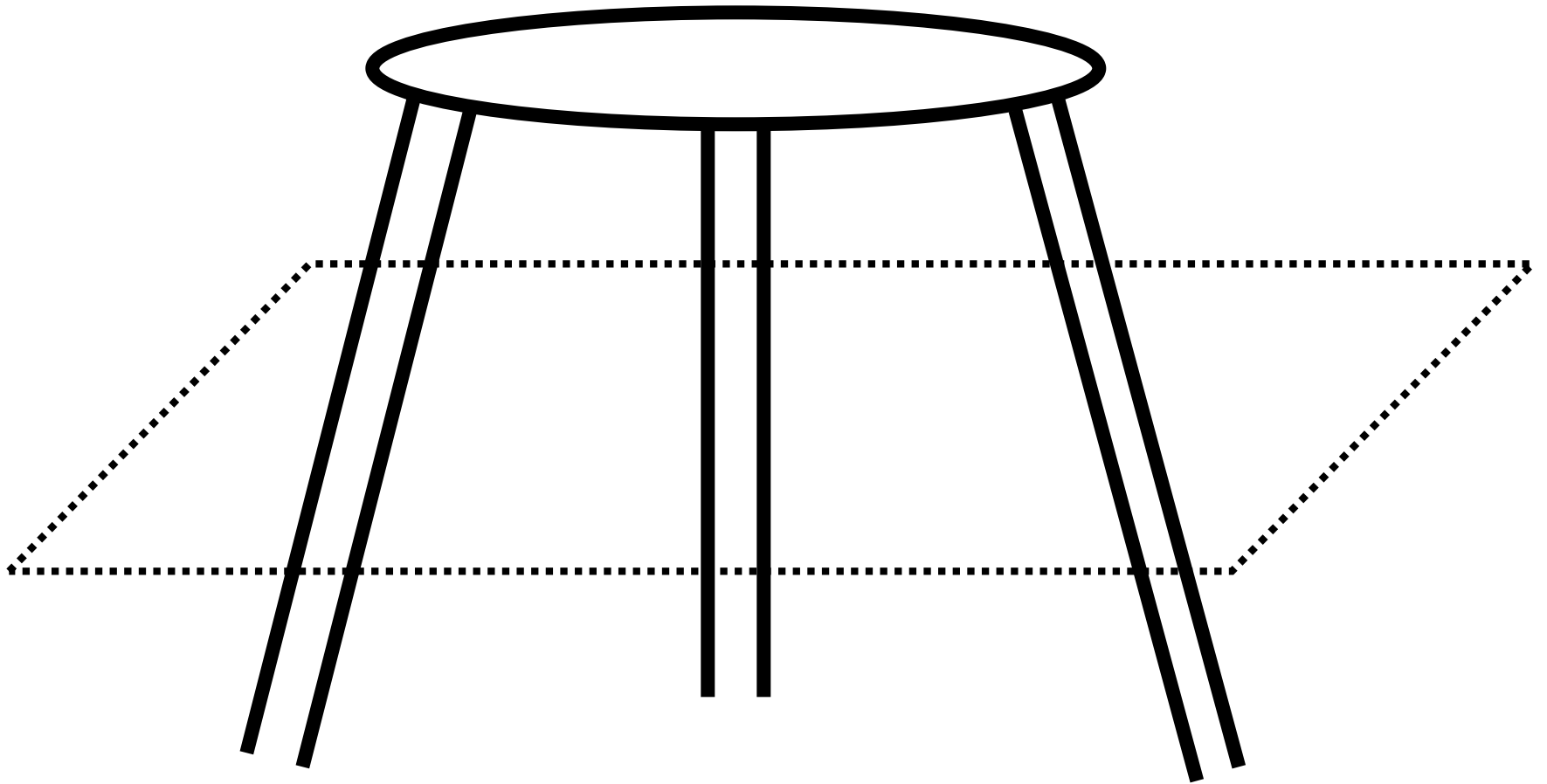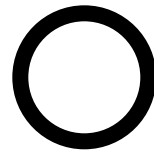
The Virtuous Physician?
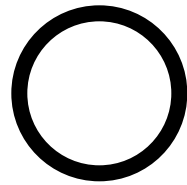
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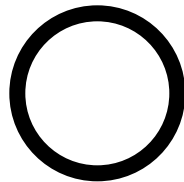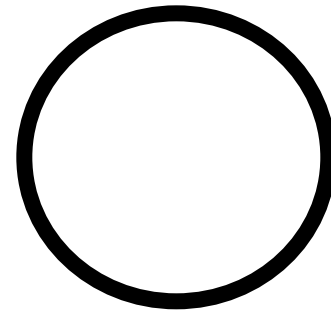
The Virtuous Physician?

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Tension: Virtuous and Non-virtuous Behavior

Deficiency	"Golden Mean"	Excess
Nontrustworthi-ness	Individual advocacy	Wastefulness
Wastefulness	Population advocacy	Pure statistician
Self-abnegation	Reasonable self-interest	Greed

"Three-Legged Stool"

- **The ideally virtuous physician strives throughout a professional life to balance these tensions:**
  - **Among the three competing values ("legs)"**
  - **Against the pulls on each "leg" to move away from the "golden mean"**