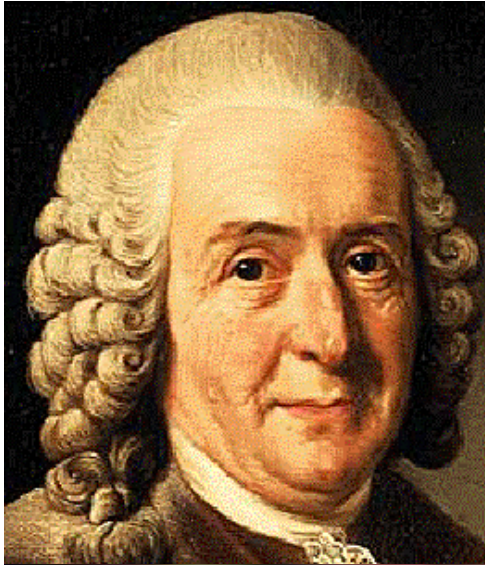


Peter Westerholm:
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Ethical analysis – a means of communication

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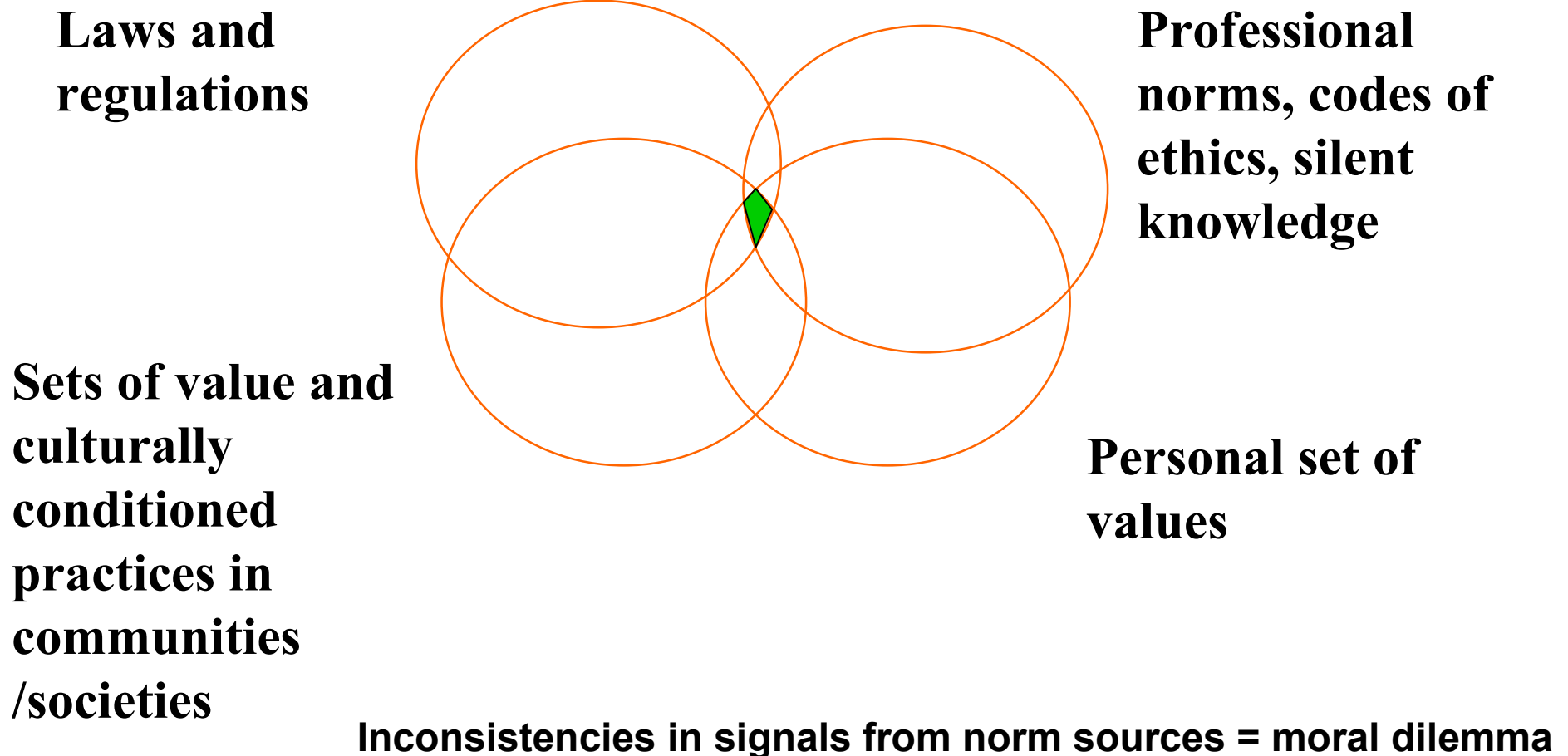
Important concepts

- **Ethics – A set of principles that people use to decide what is right and what is wrong, Good or Bad (Medical E, Professional E, Business E etc)**
- **Morals – principles of right or wrong behaviour that are generally accepted by a society or community**
- **Prima facie principle – Principles while at first sight valid, on examination needing to be weighted against other principles or norms (Ross 1871 – 1971)**
- **Utilitarianism – "That action is best, which procures the greatest happiness for the greatest number, and that action worse which in like manner occasions misery" (Hutcheson 1725)**

Ethics and Morals – values (ex.)

- **Antique Greece – Wisdom, Virtue, Moderation, Courage**
- **Christianity – Faith, Trust and Charity**
- **Bioethical Ethics – Autonomy, Doing Good, Avoidance of Harm, Equity/Justice**
- **Ethical Criteria in Health Services - Social Inclusion, Equality of opportunity, Individual and Family (dependants) autonomy, Social responsibility,**
- **Reciprocity**
- **Harmony (Confucianism)**

Legislation – Normative professional sets of value – Values in Society and Community – Personal set of values



Ethical Conduct – five perspectives

Virtue Ethics: Focus set on **Motives** and **underlying intentions** of action

Deontology: Focus set on **What is done**

Consequentialism: Focus set on **Consequences** of what was done

Situation Ethics - Focus set on **context** of events and coping with demands of situation at hand

Bio-ethics: Comprehensive scope of ethical and philosophical reflections on all biologic life in context of scientific development in medical, biological and technical sciences.

Case ethics No 1 – female circumcision

You are an occupational physician in a primary care and head of a health centre in a sub-Saharan country of Africa, funded through a shared investment of the national government, ILO and UNESCO. There are, in addition, funding contributions from a few European countries on bilateral development aid basis. You have a specialist diploma in occupational medicine and you have earlier held registrar posts in general surgery and gynecology.

In two villages of this region a traditional cultural event is envisaged to celebrate the formal adoption of mature status in the villages of 11 and 12 years old young boys and girls.

An important component part of the ceremony is a ritual circumcision of the young girls. The organizers of this cultural event now contact you requesting your presence and also your assistance on this solemn and traditional occasion.

Which value systems seem to you to be involved when considering this request?

Professional behaviour of OHP - incentives

- **Empowerment / obligation to do Good to people**
- **Recognition and appreciation of services provided**
- **Recognition and respect of Colleagues**
- **Financial and material rewards**

Case 2 - Testing for Drugs – the value basis?

You are an occupational physician providing OHS services to a small company in the Northern Carelia region of Finland manufacturing component parts to landing systems of aeroplanes. The company is doing well and the prospects of expanding market shares are promising. The majority shareholder is a major US corporation. The company staff is 50 – 60, most highly qualified technical specialists with university degrees. Unemployment rate in the region high - a cause of concern. Major shareholder indicates that significant, large new orders are in expectation, due to the current turnover of aeroplane stock of airline companies. It is implied that quality requirements , including performance standards, on company products are likely to be enhanced.

New employment of specialists and managerial staff is a likely scenario.

The major owner corporation has signalled requirements to organize compulsory drug testing of all staff at new employment and with irregular, randomly chosen points of time in the course of production.

You are president of the canoe club of the company, sponsored by the company. You may, just as all company staff, use a first class leisure-time resort in NE Finland for club members. Your husband is politically active and member of the labour and industrial committee of the community council . Your value sources in considering a decision?

What is an ethical problem ?

- **Ethical problems are related to action. They arise from decisions on action to take or or forego**
- **In an ethical dilemma important to have clarity on available alternative actions to take in a given situation and foreseen consequences of action taken for persons concerned**
- **Ethical problems imply that ethical values are competing. If in a given situation priority has to be given one ethical value principle while giving less weight to another, equally important value principle there is an ethical dilemma**
- **When a dilemma involves other values than ethical values it is not an ethical dilemma**
- **When there is only one possible line of action there is no ethical dilemma**
- **The practical approach in examining an ethical problem consists of identification of available action alternatives and clarification of their consequences for groups and persons concerned**

Loyalties of Occupational Health Professionals

- **Historically rooted in individual doctor-patient relationship**
- **Present setting – multiple loyalties and many stakeholders**
- **Employers responsibility for safe and healthy working conditions**
- **Determinant factor in setting priorities – who pays?**
- **Occupational Health Professionals own vested interests under market conditions with requirements for competitive edge**

Principle of Doing Good (“beneficence”)

Requires

- 1 Harm Avoidance **non-maleficens**
- 2 Reduce Suffering
- 3 Prevent Suffering
- 4 Enhance Wellbeing **beneficens**
 - A. **The prime obligation of Occupational Health Professionals is to protect and develop health of staff and to contribute to safe and healthy working conditions**
 - B. **The principle of beneficence is of particular importance to health professionals.**

Respect for autonomy

Implies requirements :

- Protection of Integrity
- Honesty and Trustworthiness in conduct
- Informed and Voluntary Consent
- Compliant with requirements on confidentiality in service performance.

Information about work ability, incapacity, health or health effects related to working conditions is not to be communicated to others unless there is an informed consent by those concerned among the staff.

The Ethical Principle of Justice-Equity

- **Principle of Equal Right**

All persons have a right not to be discriminated against on basis of gender, age, ethnicity, religious beliefs, socio-economic status

- **Principle of Equity**

All persons have a prima facie right to greatest possible freedom of action which is compatible with all other persons having the same right

- **Principle of Difference (Ref: Rawls)**

Inequity is ethically defensible only if it brings advantages to those who are least privileged

The Steps in an Ethical Analysis

- **Find out facts of the case**
- **Identify stakeholders and examine how they will be affected by action taken**
- **Observe the OHS professional as one stakeholder**
- **Select norms and ethical values involved**
- **Structure the ethical analysis**
- **Follow up in taking appropriate action and contacts**
- **To keep constantly in mind that this may require civil courage**

Structure of the Ethical Analysis

Ex. "Health Examination of all staff before reorganization of an enterprise"

Stakeholders	Ethical criteria		
	Do Good	Autonomy	Justice
Staff	A	F	K
Employer/Owner	B	G	L
Health consultant	C	H	M
OHS service	D	I	N
Community/Society	E	J	O

1) Choose line of action; 2) Make note of consequences of action for stakeholders (boxes A – O); Particular attention to be given consequences of your chosen action for stakeholder with regard to ethical criteria (given in table).

Case history (France)

An occupational physician is to carry out a medical examination for new employment of J.T. seeking employment as a lorry driver.

J.T. declares no particular previous illnesses or ill-health. The occupational physician certifies JT as fit for the job.

A short time afterwards the occupational physician hears by a chance event that J.T. exhibits serious serious circulatory disease and a sleep apnoea which has not been medically attended.

The occupational physician calls JT for a repeat visit. After this visit with heated exchanges the occupational physician asks JT to seek medical advice for his sleep apnea. In awaiting this consultation the occupational physician withdraws his previous health certificate.

JT takes a hostile attitude, threatening the occupational physician and informing that he will go elsewhere to seek employment as a professional driver and also to drive his own car.

Question: Do codes of professional ethics provide an answer to ethical dilemma of occupational physician?

Analysis (crude) case no 3. Decision: Person declared incapable

Judgements (-); (+); 0 ; (?) or not applicable (n.a.)

	Autonomy Integrity	Doing good	Justice Equity
Person concerned	-	-	?
Employer	n.a.	+	n.a.
Occup Physician	+	+	?
Society			?
- Public health agency	+	+	
- Social security	?		
- other societal organs ?	n.a.	+?	+ or -

QUESTIONS: Effectiveness of action taken? Measures taken to prevent employment in other transport companies? Measures taken to reinsert person into work? Validity of methods used for assessments of working capacity?

Case no 3 (France) Values and stakeholders

Decision of Occupational Physician - Incapable for present work

Assessments: +; - ; 0; n.a.

	Beneficence	Protection of autonomy and integrity	Justice - Equity
Employee	-	-	-
Employer	+	n.a.	n.a.
Work colleagues	+	0	n.a.?
OccPhysician	+ and -	n.a.	?
All OccPhysicians	?	n.a.	n.a. or ?
All France	?	n.a.	- or ?

QUESTIONS: Legal and professional mandate of Occupational Physician in carrying out task? Professional role and relationship with employee?

Case Ethics No 4

A senior art director of a company undergoes medical treatment for a bipolar psychiatric disease. His illness implies endangering the existence of the small company (six employed), which produces highly sophisticated commodities to a market niche. The risk of company going into liquidation is imminent.

The manager requests the occupational physician to do something since the art director is constantly under police arrest or hospitalized or on luxurious travels which are not related to his professional obligations.

The manager requests the occupational physician to declare the art director not to be healthwise fit for his work tasks.

The art director is not likely to declare himself as unfit for his work tasks.

Can the occupational physician integrate the best interests of the enterprise and the management of the art directors health problem? The survival of the enterprise depends highly on the status of health of one person.

Ethics case No 5

A staff member suffering from recurrent mental disorder returns to work after having been absent for some time following recommendation by the treating physician assessing resumption of work to have a beneficial effect. His conduct at work, however, disturbs the social climate of the workplace and his colleagues claim to be unable to carry out their tasks and find his presence to be intolerable.

The occupational physician has demanded to arrange a special workplace isolating him from other workers of the team. This solution is, however, not possible to implement. The OP does not know which interest to set in priority, the health of the worker or the health or life quality of the workers colleagues at work.

Is this a case of real incapacity to work caused by the mental health disorder? Or is this a case of a manifest socio-pathology?

Case 6 : Weakening eyesight

- Male truck-driver S., 55 yrs. Vision successively becoming weaker. Consultant ophthalmologist observes retinal change consistent with macular degeneration. S. insists weakening eyesight does not affect work ability and regards matter as his private concern. Keeps matter secret and does not tell others. Occupational physician assessment: Retinal changes increase accident hazard involving others at workplace, possibly also the public.

Professional management of case ?

- Legal case? Moral case? Professional Ethics?
- Ref: K-P Martimo, M. Antti-Poika, T. Leino, K. Rossi : "Ethical issues among Finnish occupational physicians and nurses", *Occupational Medicine* (1998). Vol. 80, pp 375-380

Hard Ethical questions

- **Is it ethically defensible to market OH services which are not based on needs of client ?**
- **Is it ethically defensible to market OH services of doubtful effectiveness ?**
- **Is it ethically defensible to market OH services for which the service provider has no or insufficient competence ?**
- **Is it ethically defensible to market OH services aiming at protection of own survival in market ?**

Harvard Business School (T.Piper)
Pedagogical Challenges in Ethical Decisions

- **Ethical discussions unpredictable in timing and focus. Difficult to have adequate teaching plans**
- **Students often want answers and the faculty do not have them**
- **Some students raise ethical issues because they think it is what the faculty want to hear**
- **Challenge is to make students go beyond their gut reaction to an ethical dilemma and to think analytically, as they do on other issues**
- **Because faculty do not have analytical models ready, students complain that ethical discussions are flat and lacking in direction.**

Pedagogical Challenges in Ethical Decisions (Harvard Business School, T. Piper)

- **Discussing ethics in the classroom is like "playing with with a loaded gun" by students. It may strengthen inclination towards political correctness**
- **Faculty may have mixed feelings about their status as personal role models**
- **A faculty's age, experience and familiarity with case method of teaching combined with individual perception of faculty role could affect faculty willingness to integrate ethics into curriculum**
- **Preconceived ideas of faculty and classroom norms**

The Ethical Dialogue

- The dialogue to be based on practical problem situations
- All participants have equal rights and weight
- OH professionals have a particular role in bringing in aspects which are otherwise ignored or disregarded
- The ethical dialogue is based on knowledge and real-life experience
- Aims at identification of sets of values involved
- Seeking to see a moral problem/dilemma in a different light
- Ethical awareness of OH professionals implies accountability and justification of own actions

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