

ETHICS

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SHEELAGH MC GUINNESS

Introduction

- Principalism
- Ethics and Research
- Fears and Fiction

“As I began to teach using this framework I was impressed by the readiness with which doctors could agree that the four principles were indeed consistent with their own perspective on medico-moral issues. When I lectured more widely I found similar reactions from nurses, other healthcare workers, medical students....”

Gillon, R. ‘The Four Principles Revisited- a Reappraisal’, *Principles of Healthcare Ethics*, ed. Gillon, 319

Beauchamp & Childress on the Four Principles

- Beneficence
- Nonmaleficence
- Justice
- Autonomy
- Beauchamp and Childress wished to create a method for use specifically in the field of bioethics and not a more general ethical theory
- Different principles for HUMAINE?

Specifying and Balancing

“Specification is an attractive strategy for hard cases of moral conflict as long as specification can be justified. Many already specified rules will need further specification to handle new circumstances of conflict. Progressive specification often must occur to handle the variety of problems that arise, gradually reducing the dilemmas and conflicts that abstract principles lack sufficient content to resolve....”

“Moral progress is made through this work of specification, which often involves a balancing of considerations and interests, a stating of additional obligations, or the development of policy.”

Some criticisms on content and method

- Universal Definitions and Common Moral Language?
- All title no substance!
- “even this prohibition against breaking a promise turns out to be empty as a universal principle”
- Lack of Criteria for Specification and Balancing

What is the use of the four principles?

- Use along side other general moral theories?

“Nor, I believe, do all healthcare workers themselves need to try to acquire sufficient philosophical skills to come to a soundly based, well defended philosophical decision about which moral theory they accept as grounding those principles and why they reject all the others. If life long philosophers cannot succeed in this enterprise to the satisfaction of their philosophical opponents it would surely be ludicrous even to suggest that it is appropriate for healthcare workers spending a small part of their student and professional lives on the study of healthcare ethics to attempt it.”

- A valuable method for ethical reasoning?

Ethics and Research

- Role of the Ethicist
- Role of the Scientist
- Duties of both.
- ‘Ethics Approval’

Ethics & Fiction

- ‘Fears’ of technology

“Myth is to be defined as a complex of stories...some no doubt fact, and some fancy...which, for various reasons, human beings regard as demonstrations of the inner meaning of the universe and human life.”

“The difficulty here is that a story such as Frankenstein, although obviously not conveying, nor intending to convey scientific facts, can disclose deeper realities, even ‘facts’ about the human condition.”

Conclusion (1)

- How best to use ‘Principlism’?
- Appropriate Ethical Guidelines
- How best to address ‘fears’?

Conclusion (2)

The point and place of particularism

The place of particularism

- 'Rules of thumb'
 - Rough practical guidelines to capture commonsense morality
 - In the event of conflict (e.g. between justice and beneficence), consider the particulars of the case (i.e. particularism)
 - Commonsense morality survives science fiction (cf mobile phones)
- Not relativism but contextualism

The point of particularism

- Complementary to a wider ethics
 - Social responsibility
 - Positive responsibilities
- Makes our ethics readily explicable to 'the public' as not being 'special' to HUMAINE