#### Spirituality and Ethics: A Most Valued Partnership in Advancing Health Care

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# Background

- Work in hospital or medical setting?
- Aware of ethics committee as a resource?
- Requested an ethics consult?
- Requested to assist ethics committee?
- Been involved in a case with ethical questions/issue?

# Objectives

- 1) Consider the role of spiritual care in addressing bioethical issues.
- 2) Assess the impact of spiritual care in resolving ethical conflict.
- 3) Managing emotions when values conflict with ethical choices and/or outcomes
- 4) Clinical relationship between spiritual care and ethics in the hospital inpatient setting

## What is ethics?

Some useful definitions:

- morality
- ethics
- value
- professionalism
- applied ethics

#### Morality Concerned with Three features: right conduct, Prescriptive personal belief - Authoritative system or - Relational or judgments interpersonal Answers the question: WHAT should/ought I (we) do in this situation?

#### **Ethics** An examination of From thinking the moral life scientifically (what can we do?) to thinking analytically and contextually Answers the (what should we question: WHY do, and why?) should I (we) do Raises questions X? and offers arguments

## Value

- Definition
  - the regard that something is held to deserve; importance or worth.
  - principle or standard of behavior
  - an ideal accepted by some individual or group

- Student descriptions
  - Quality or standard for behavior
  - Action guides/guiding principles
  - Something of overriding importance
  - Ideals
  - Characteristics possessed by physicians

## What ethics is not:

- The differences:
  - Ethics is what you should do, not necessarily what you would like to do or have to do.
  - Ethics requires identifying the questions that should be asked.
  - Ethics requires argumentation/reason- giving
  - Ethics is not subject to majority rule or other features of democracy

# Situation involving a difficult or persistent moral problem in which two or more moral actions Conflict Can be supported Are equally unsatisfactory Are without conclusive evidence favoring one position Distinguished from a personal dilemma (self interest vs. moral duty)



# Role of the Clinical Chaplain

Spiritual Assessment
Values History
Communication- Advocacy
Conflict Management and Resolution
Assessing healthcare literacy
Supporting cultural desires
Attending to moral/ethical distress
"Cultural broker" between 'medicalese' and patient desires

# Spirituality and Ethics

Religious and spiritual beliefs

- Frame beliefs about health care
- Guide decision making
- Inform treatment preferences
- Provide comfort during illness
- Offer support for family

#### Relationship

• What is the relationship between spirituality and ethical practice? Since love and compassion and similar qualities all, by definition, presume some level of concern for others' well-being, they presume ethical restraint. We cannot be loving and compassionate unless at the same time we curb our own harmful impulses and desire.



Dalai Lama

# Chaplain integration with ethics

Advocate for clinician understanding of patient/family belief systems

- Manage religious beliefs in conflict with medical recommendations
- Reconcile patient and family beliefs
- Address religious misconceptions
- Support decision making consistent with religious/spiritual beliefs
- Work with patient clergy/spiritual leaders to support decision making process

# Case for discussion: Dudley

- 54 yo M, end-stage esophageal cancer, metastatic to lung and bone, poor nutritional status, new sacral ulcer
- Scans show disease is progressing despite treatment
- Admitted for SOB, confusion, weakness, found to have pneumonia
- No advance directive

# Case—social factors

- Patient lives with wife, 2 teenage daughters.
- Aggressively pursued chemo, but uncertain about continuing due to recent disease progression
- Primary breadwinner
- Catholic faith, limited practice

## Case perspectives

- Physicians: chemo no longer effective, palliative radiation possible, antibiotics for pneumonia, may require long-term ventilator support, consider feeding tube, but recommend transition to comfort
- Wife: requests "everything" especially concerned about feeding
- Daughters: concerned about Dad's suffering, but also worried about Mom

# **Ethical question**

• Given that the patient's wishes are unknown, the family is conflicted about what the patient would want, and the physicians are offering treatment but recommending hospice, what is the ethically preferable course of treatment?

#### Case discussion

- What are the treatment options?
- What course of treatment would you recommend?
- What factors informed your recommendation?
- What would your communication with the family, the medical staff look like?

# Questions for consideration

- What religious beliefs are informing medical decisions?
- What is the patient's belief system?
- How do those religious beliefs conflict with medical beliefs or recommendations?
- How should those conflicts be addressed?
- Does the chaplain have a role in addressing conflict?
- How can the chaplain assist the process of ethical decision making?
- How can the Ethics Committee support the Chaplain's role?



