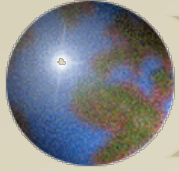


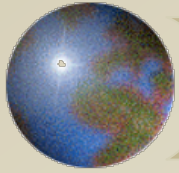
*The Ethics of Difference:
Challenges of Human
Diversity*

Banff, October 16, 2010
Al-Noor Nenshi Nathoo
nathoo@phen.ab.ca



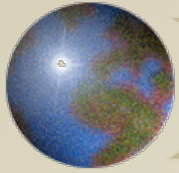
Outline

- ✚ Case 1: Patient-Centred Care
- ✚ The On-Going Delivery of Care
- ✚ When Values Collide
- ✚ Negotiating Difference
- ✚ Case 2: A Choice for K'aila



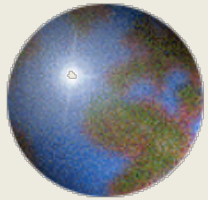
Patient-Centred Care

- ✦ A 75 year-old man, Mr. M., of European background, has end-stage renal disease (he refuses dialysis) and lives alone in his apartment. He is visited by a home support worker 3 days a week for personal care, general cleaning and assistance with day-to-day tasks. He had been referred to home care by his attending physician because of his general immobility and difficulty doing things for himself. The client was known amongst the home care staff for his stubbornness. A new home care worker is assigned to him, of South Asian heritage.

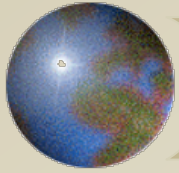


Patient-Centred Care

- ✦ When the home care worker arrived, Mr. M. appeared cautious for the first half hour, not saying anything but grumbling and mumbling a few incomprehensible words every few minutes. When it came time for Mr. M. to take a bath, he told the home care worker that he knew there were many more of the home support workers' "kind" around nowadays and he had no objection to that, but he didn't want a bath today. At the next home visit, he again refused. On the third visit, he said he did not want to be touched by the home support worker, and would he please leave. The support worker tried to dissuade him, but to no avail. The home care agency was a private agency contracted to the health region to provide services in that area. The health region strongly advocated what it called patient-centred care. The home support worker reported the incident back to his manager, asking what he should do.
- ✦ What should the manager and the home support worker do?



I: The Everyday Delivery of Health Services

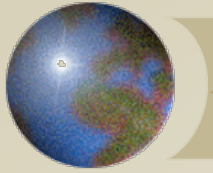


The Basis for Discussing the Ethics of Difference

All individuals are equally entitled to care regardless of:

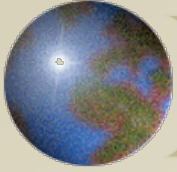
- culture
- race
- ethnicity
- mother tongue
- ability/disability
- gender
- faith
- sexual orientation





We Are The 'Other'

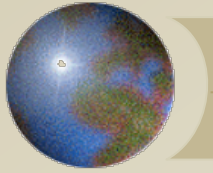




Sensitivity & Respect

- ✦ “It is reasonable to suppose that cultures which have provided the horizon of meaning for large numbers of human beings of diverse characters and temperaments, over a long period of time... are almost certain to have something which deserves our admiration and respect...”
- ✦ It would take a supreme arrogance to discount this possibility...”

Charles Taylor, Multiculturalism and The Politics of Recognition

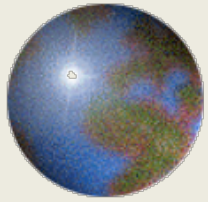


Ethical Issues in Cross-Cultural Health Settings

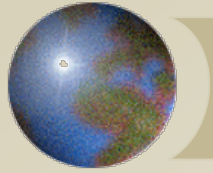
Examples of issues in the delivery of care

- ⊕ food
- ⊕ diet
- ⊕ dress
- ⊕ alternative therapies
- ⊕ visiting regulations
- ⊕ notions of time
- ⊕ response to pain and suffering
- ⊕ language/communication/eye contact/frankness





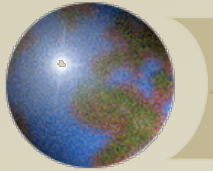
II: When Values Collide: Whose Choice?



Ethical Issues in Cross-Cultural Health Settings

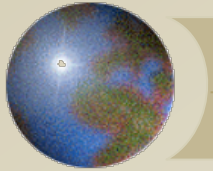
Examples of Value Clashes:

- ✦ Place of family/individual
- ✦ Truth-telling
- ✦ Cessation of treatment
- ✦ Rejecting care due to colour/race
- ✦ Religious beliefs



Religious Freedom

- ✦ A Catholic Hospital in a rural area receives public funding to service the 50,000 residents in its catchment area. The Board of the hospital passes a motion to prohibit any reproductive interventions (abortion, emergency contraception, tubal ligations, vasectomies, and fertility treatments) taking place in the institution, regardless of the faith of the patient. Staff are also not allowed to refer patients to other services, as this would be seen as being complicit in immoral acts. If the decision of the Board is implemented, residents who would like such procedures will have to travel another 400 km to the nearest non-Catholic hospital to receive services. How should the health region - which funds the hospital - respond?

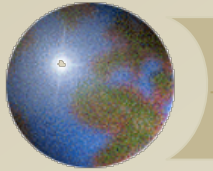


Stereotyping

“What conclusions can be drawn from these cases? In general, same-sex physicians and nurses should be assigned if possible when dealing with non-anglo ethnic groups. Try to keep patient’s genitals covered whenever possible.

Recognize that sex roles and authority figures vary, though males generally hold the dominant position.

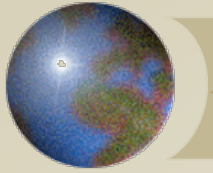
This advice may rankle many women, who may interpret this as enforcing male domination. Perhaps it does, but if the goals are patient compliance, smooth working relationships, and the best possible care, this will be the most expedient way of achieving them”.



Stereotyping

“An East Indian woman created a difficult situation for the nurses and her roommate. During a staff conference on this patient, one of the nurses suggested putting her in a room with Rapinder, another Indian patient, who might be tolerant about the stream of visitors. A nurse on staff quickly pointed out that Rapinder was Hindu. Hindus and Sikhs do not always get along, and it would be unwise to assign them to the same room. The fact that two people are from the same country does not guarantee that they are from the same culture.”

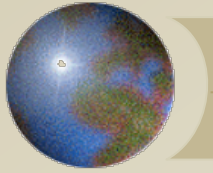
[Caring for Patients from Different Cultures, 1991](#)



Ethnocentricity

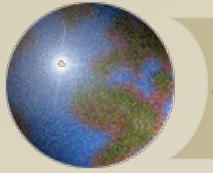
- ✦ “The thinking of an African woman who believes ‘Female Genital Mutilation (FGM) is the fashionable thing to do to become a real woman’ is not so different from that of an American woman who has breast implants to appear more feminine...”
- ✦ “Comparing FGM and plastic surgery or even the wearing of high heels is not meant to trivialize the enormous physical and psychological damage FGM causes, but to relate it back to the ways all women suffer from false ideals of ‘femininity’”

Nahid Toubia, Female Genital Mutilation: A Call for Global Action, Women Inc, United Nations, New York



The Place of Autonomy

- ⊕ Individualism & control centred on self are biases of western societies
- ⊕ Result of society that places individual before community
- ⊕ Differences may appear in decision-making, writing advance/personal directives, truth-telling to patient
- ⊕ Willingly relinquishing control is an autonomous act



The Balancing Act

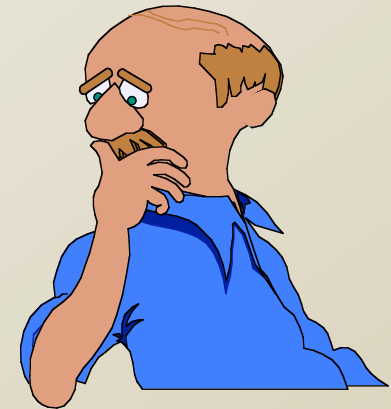
Cultural
sensitivity

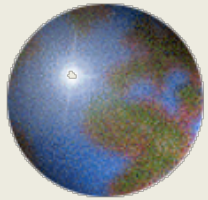


Misinformed
Generalization

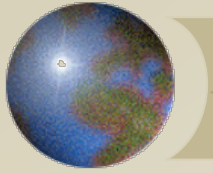
The way of dialogue, respect
and sensitivity

Tolerance versus Respect



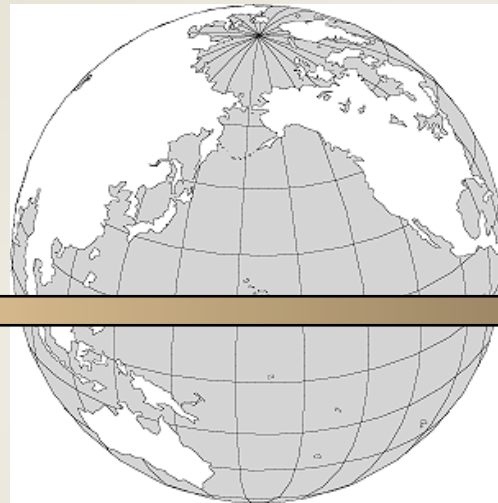


III: A Framework for Negotiating Value Differences

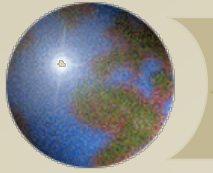


Is There A Moral Theory Applicable to All?

Relativism

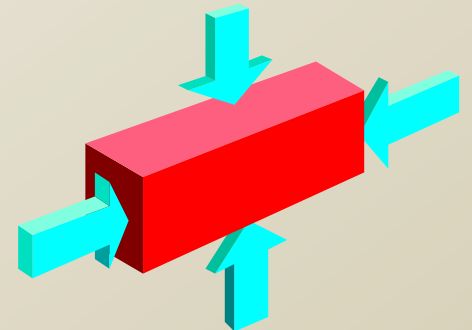


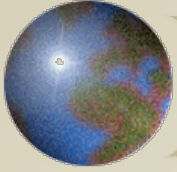
Absolutism



Methods of 'Dealing With Value Differences'

- (1) Non-acceptance
- (2) Substitution
- (3) Addition (retain both sets, use either)
- (4) Combination - integrate elements from both
- (5) Creation - devise new innovative system that draws on old

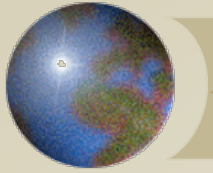




Decision-Making Approach

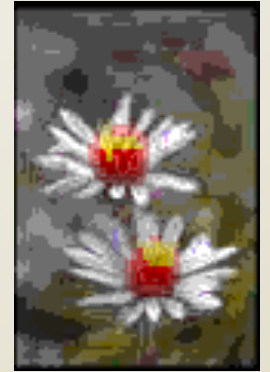
- (A) Identify goals of care
 - central aims that care provider and patient bring to encounter
 - requires gathering information about values and culture
- (B) Search for mutually agreeable strategies
 - consistent with both care provider and patient's beliefs
- (C) Re-examine personal values
 - consider re-interpreting, reordering or changing them in light of the case
- (D) Engage in formal dialogue/discussion/adjudication
 - ethics committee, care team and patient meeting...

*Based on Framework developed by Jecker, Carrese & Pearlman

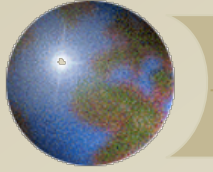


Opportunities for Growth

Health care interactions between individuals of difference can be seen as:



- ❖ Creating additional burdens and issues in already-difficult settings
- or
- ❖ As opportunities for self-reflection, analysis, learning and growth for provider and recipient of health care



The ethical system of any culture is morally defensible because it is grounded in truths which transcend that culture; it is not morally defensible simply because it is the product of a particular culture. Respect for culture and ethics other than our own is the beginning of any intercultural dialogue, not its ending.

Dr. Edmund Pellegrino