The Principle of Autonomy

Submitted for course work

PHIL 365 – Biomedical Ethics: Theory and Philosophy
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Part 1. What is the ethical dilemma?

Ethical Dilemma: Should Patient's Autonomy Be Compromised Due to Family Members Don't Agree on Making a Medical Decision for Treatment?

Ethical dilemmas occurs when ethical principles and values are in conflict. Especially in healthcare, when there are alternative choices, limited resources, and differing values and beliefs among patients, family members, and caring physicians. The purpose of this paper is to discuss the ethical dilemma involving Dave (patient), his family, and his Dr. Barelle (caring physician) have a role involving with his aggressive treatment due to his health declining from prostate cancer. Dr. Barelle is in a challenging position knowing Dave and his family members disagree on his care and treatment. Dave admits to being concerned about aggressive therapy, stating that he doesn't want it, and says that he values his independence above all else and fears pain, suffering, an impending loss of functioning, and losing his autonomy. He acknowledges that aggressive acute treatment seems excessive and pointless at this stage. On the other hand, his family members disagree strongly pressuring him to agree to receiving aggressive therapy in hopes of prolonging his life. The scenario reflects the ethical dilemma involving the Principle of Autonomy and the Principle of Beneficence conflict with one another. The story influenced me to argue based on the Principle of Autonomy, which states patients who are in their rational state of mind and fully aware of their medical condition should have the right to make decisions regarding their care (Podgar, 2016, p.40), even when their decisions contradict their family members in a paternalistic approach.

Part 2. What resolutions to the dilemma do other people suggest?

According to authors Beauchamps and Childress's Principles of Biomedical Ethics, autonomy maintains the patient as the final authority to make medical decisions. It indicates the manner of self-sovereignty: every person has the privilege to make decisions regarding his or her own body and other aspects. When the conflicts that arise between a competent patient's self-determination and his or her apparent well-being remain unresolved after adequate deliberation, a competent patient's self-determination is and usually should be given greater weight than other people's views on that individual's well-being. Respect for the self-determination of competent patients is of special importance. The patient should have the final authority to decide (Beauchamp & Childress, 2019). Because Dave is aware of his prostate cancer stage and that the treatments he must undergo are aggressive and painful, I support the author's theory in this case. Dave made it clear to Dr. Barelle that he doesn't want to participate because he fears the pain and, more importantly, losing his autonomy to make his own medical decisions.

The Principle of Autonomy may be contested by those with opposing viewpoints regarding what determines a patient's best or most positive outcomes. Some believe that there can be justifications for violations of the principle of autonomy. In this situation, the family members and Dr. Barelle support the paternalism approach or principle which is a form of beneficence. The Principle of Beneficence is based on making decisions they believe would promote the greater good in benefiting the person's best interests (Munson & Lague, 2017, p. 945). Despite Dave's expressed wishes for his treatment, the family believe it is justifiable when they act to enhance or protect the best interests for Dave to undergo treatment to prolong his quality of life. As someone who has cared for a parent with a chronic medical condition, I understand why we feel obligated or that it is our duty to act for the benefit of those we care for

and love. However, we must consider that paternalistic decision making is problematic if the person is competent and wishes to make their own decisions, which results in a violation of a person's autonomy rights. And in this case, Dave is a competent patient who is fully aware of his medical conditions, so the Principle of Autonomy takes precedence over the Principle of Beneficence.

Part 3. What resolution to the dilemma do you think is the morally correct one?

The definition of the Principle of Autonomy is the capacity to think, decide, and act freely and independently based on such thoughts and decisions (Pozgar, 2016, p. 40). A further reason to support autonomy is Kant's Formula of Ends states, "we should always treat the person with respect and never treat them as a means towards an end." I mentioned Kant's theory here because it is strongly related to a person's autonomy. In Dave's case, his family and physician should not coerce or persuade him to give up his rights in order for everyone to benefit or gain an advantage from the outcome, even if it was done with good intentions. I believe that allowing Dave to make his own decision about whether he wants to undergo treatment, participate in research, or refuse it for his prostate cancer is the morally correct thing to do in this case. One of Kant's important teachings, I believe, is to respect a person's autonomy of choices and actions unaffected by external influences (Taylor, 2017). To prove my viewpoint here is my main argument based on my premises, possible objection, and response to possible objections in the form of Modus Ponens:

Main Argument

Dr. Barelle would be morally wrong if he allowed Dave's family to decide all of his medical care and treatment options without Dave's knowledge or consent. This undermines Dave's autonomy as a competent and rational patient who should be entitled to make decisions in his own best

interest (Munson & Lague, 2017, p.943). According to Mill's principle of utility is to minimize suffering and increase happiness (Aufrecht, Module 2a Lecture, n.d.). In this scenario, Dave voiced his feelings of fear and unhappiness over the pain and suffering he must experience due to the aggressive treatment.

Premise 1: If when Dave stated he is aware of his medical condition and the treatment's side effects but still decides against having aggressive treatment for Dr. Barelle out of fear of pain and suffering, then it is morally wrong for both Dr. Barelle and his family members to disregard Dave's wishes.

Premise 2: When Dave's family does not acknowledge his right to medical decisions, they violate his autonomy.

Conclusion: Dave's family members are morally wrong to pressure or coerce him to undergo treatment against his will.

Although, there may be some objections to my argument:

Possible Objection 1

One might argue that Premise 1 is false because Dave is not in his state of mind to think rationally due to his stage of prostate cancer and fear of the side effects made him want to refuse treatment. He should at least give it a try. Maybe it might not be as bad as he thinks. There may be other alternatives of therapy that Dave can have without having to suffer through pain as much, such as administering medications before having treatments or procedures.

Response to Objection 1

In defense of Premise 1, Prostate cancer is a severe disease for men requiring serious treatment.

Although it was not clearly stated what kind of treatment he needs and given that there are various alternatives that Dave can look into, ultimately, his body must undergo all the treatments

and therapy. Whether he can tolerate the pain or not, it is still his choice to decide whether to receive treatment or not.

Possible Objection 2

One might argue that Premise 2 of the argument may be false. Dave's family member disagrees with his decision to treatment because they believe they are acting in a paternalistic manner that they think is justified when it comes to what is best for Dave's best interest (Munson & Lague, 2017, p. 49). The family believes they are practicing the principle of beneficence which is wanting to do good in helping to prolong Dave's life through treatment.

Response to Objection 2

Even Dave's family's only intention was to produce or provide what they felt would be in the best interest for Dave to agree with treatment in hopes of prolonging his quality of life. However, autonomous actions should not be subjected to controlling constraints by others. It is morally wrong to coerce a person against their will or consent, which violates their autonomy.

Part 4. What further information could convince you to change your mind?

A couple of reasons that would make me consider convincing or change my mind would be if Dave were a patient that was incompetent or incapable of making his own decisions due to altered mental status, Dementia, comatose, psychotic, under the influence of drugs etc. They would need a moral agent or power attorney to make important medical decisions on behalf of one's inability. Another reason would be cultural differences in our patient's religious beliefs, traditions, and values. Some studies have explained the differences between the Western and Eastern bioethical Principles of Autonomy. The Western principle of Autonomy is that the

patient maintaining their independence has the authority to decide on what is in their best interest regardless of others (family, doctor, etc.).

On the contrary East Asian principle of Autonomy is the entire patient's family is involved in the decision-making, not just the patient alone. Their conception of Autonomy is based on a harmonious dependence on family (Fan, 1997). But the important goal is to figure out who makes the decisions, whether a patient, family member, or doctor. And then, who is greatly affected by this course of action? These are significant issues to consider regarding the Principles of Bioethics-Autonomy.

Conclusion

Despite family members' and the care physician's concerns for Dave's best interests or intentions, and shared decision making as an act of paternalism derived from the Principle of Beneficence. Conflicts of interest based on family dynamics and individuals' emotions can and do arise, and disagreements among family members about the patient's values and wishes can have a significant and potentially negative impact on treatment and care plans. For this reason, I would have to agree to respect Dave's wishes because he is rational, fully aware of the consequences of his medical condition, and has stated his wish to be valued by family. He should have the right to make decisions about his treatment, even if those decisions do not align with those of his family members and caring physician. Furthermore, the story gave no indication of Dave appointing any of his family members as his power of attorney to make medical decisions on his behalf.

Optional Reflection:

This research assignment was very meaningful to me ... If I had more time, I would love to be able to engage in interviews with patients and their family members who had gone through similar challenges of having to deal with autonomy issues involving family members not agreeing to medical care or treatments. Conduct more research into the differences between Western Principle of Autonomy vs Eastern Asian Principle of Autonomy as well. Having completed this assignment provided me with great information and resources of how to deal with issues of autonomy and apply it in real life.

Bibliography

- Beauchamp, T. L., & Childress, J. F. (2019). *Principles of Biomedical Ethics*. Oxford University Press.
- Fan, R. (1997). Self-determination vs. family-determination: Two incommensurable principles of autonomy. *Bioethics*, 11(3-4), 309–322. https://doi.org/10.1111/1467-8519.00070
- Munson, R., & Lague, I. (2017). Intervention and reflection: Basic issues in bioethics. Cengage Learning.
- Pozgar, G. D. (2022). Legal aspects of Health Care Administration. Jones & Bartlett Learning.
- Sedig, L. (2016, January 1). What's the role of autonomy in patient- and family-centered care when patients and family members don't agree? Journal of Ethics | American Medical Association. Retrieved November 18, 2022, from https://journalofethics.ama-assn.org/article/whats-role-autonomy-patient-and-family-centered-care-when-patients-and-family-members-dont-agree/2016-01
- Taylor, J. Stacey (2017, June 20). autonomy. Encyclopedia Britannica. https://www.britannica.com/topic/autonomy