Conscientious objections in end-of-life care

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Introduction

- Belgian euthanasia act came into force in 2002
- Interesting case to study relationships between culture, religion, and end-of-life care
- Flanders: cultural transformation from dominant Christian culture into post-traditional Christian, pluralist culture, characterized by ideological diversity
- Appropriateness of conscientious objections remains controversial
- How can personal ethical convictions and beliefs of individual caregivers (conscientious objections) be respected?

Argument-based literature review: methodology

- Focused questions:
  - What are the primary positions addressing conscientious objections in end-of-life care?
  - Upon what arguments are these positions based?

Argument-based literature review: methodology

- Search methods:
  - Pubmed, Embase, Cinahl, Web of Science, Philosopher’s Index
  - Excluded: empirical studies, editorials, comments, case studies, ethics codes, position papers

Argument-based literature review: methodology

- Nonconventional compatibilists
- Conventional compatibilists
- Conventional incompatibilists

Conscientious objections: 3 categories

- Non-conventional compatibilists
  - Socio-cultural conventions do not serve as a valid basis to override CO
- Right to personal objection is compatible with professional obligations
- No dichotomy between personal moral obligation and professional obligation
- Moral person is viewed holistically
- When individual is compelled to act against his conscience, his personal identity is violated, resulting in moral distress
Conscientious objections: 3 categories

- Obligation to provide continuum of care until transfer to another caregiver
- Obligation to disclose objections to involved parties
- Religious sourced, e.g. Edmund Pellegrino

Conscientious objections: 3 categories

- Conventional compatibilists
  - Conscientious objections are compatible with professional obligations so long as conventional standards of society permit such objection
  - Willingness to disclose their positions
  - Willingness to cooperate in referral
  - Patient may not be burdened (counseling)
  - Social contract theory and individual autonomy, e.g. Dan Brock
  - Care relation as contract between 2 participants to respect their beliefs, ...

Conscientious objections: 3 categories

- Conventional incompatibilists
  - Conscientious objection is personal preference and is incompatible with caregiver’s professional obligation to render legally accepted services according to societal conventions
  - Patient autonomy should be of greater importance than physician autonomy
  - Society expects that physician will not choose treatments by referring to their own personal preferences.

Conscientious objections: 3 categories

- Temporary toleration until conscientious objections are made illegal
- Secular progressive, e.g. Julian Savulescu

Discussion

- Unsolvable clash?: conscience is part of identity of whole person versus conscience is personally acquired social construct

Discussion

- Agreement:
  - Patient should be adequately informed about conscientious objection;
  - Disclosure at the beginning of care relationship;
  - Cooperation in transfer.
### Discussion

- **Argument contra:**
  - Negative impact on patient’s autonomy

- **Argument pro:**
  - Making CO illegal would de-motivate some people to become a physician
  - How providing good care when you should act against your conscience?

### References