

Tragic choices: Ethical uncertainty & least-worst options in humanitarian healthcare

Adapted fr photo by L Redwood-Campbell



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Humanitarian Health Ethics Research Group

hhe

humanitarianhealthethics.net

humanitarian healthcare ethics
reflecting on ethical practice

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My aims

- Consider how tragic choices arise in humanitarian practice by examining two prominent examples:
 - Dilemmas of competency
 - Dilemmas of patient selection
- Propose avenues for responding to tragic choices in humanitarian health work

Humanitarian crises

- Acute, chronic
- Needs elevated, resources limited
- Social/political strain, instability
- International response



Photo: M Hunt

Humanitarian health work

Photo: J Pringle



- Greater uncertainty, less can be ‘taken for granted’
- Lack familiar resources, reference points, consensus
- Less accountability and oversight

...

What does it take to be a humanitarian worker?

“...graduate degrees in social anthropology, geography, economics, a dozen or so difficult and unrelated languages, medicine and business administration, competence in agronomy, hydrology, practical nursing, accounting, psychology, automotive mechanics and civil engineering. In addition, they must learn to give a credible imitation of saintliness...”

Susan George

What does it take to be a humanitarian worker?

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Susan George

“Must also be something of a moral philosopher”

Hugo Slim

4 sources of ethical challenges

Resource scarcity

Social, political,
commercial
structures

Aid agency
policies,
mandates

Professional
norms

[*American Journal of Bioethics – Primary Research.*](#)
2010. 1(3): 45-54.

Ethics in Humanitarian Aid Work: Learning From the Narratives of Humanitarian Health Workers

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Little analysis has been made of ethical challenges encountered by health care professionals (HCPs) participating in humanitarian aid work. This is a qualitative study drawing on Grounded Theory analysis of 20 interviews with health care professionals who have provided humanitarian assistance. We collected the stories of ethical challenges reported by expatriate HCPs who participated in humanitarian and development work. Analysis of the stories revealed that ethical challenges emerged from four main sources: (a) resource scarcity and the need to allocate them, (b) historical, political, social and commercial structures, (c) aid agency policies and agendas, and (d) perceived norms around health professionals' roles and interactions. We discuss each of these sources, illustrating with quotes from the respondents the consequences of the ethical challenges for their personal and professional identities. The ethical challenges described by the respondents are both familiar and distinct for bioethics. The findings demonstrate a need to provide practical ethics support for humanitarian health care workers in the field.

Keywords: bioethics, ethics, global health, humanitarian aid

Tragedy and humanitarian action

doi:10.1111/j.1365-3066.2010.01493.x

The humanitarians' tragedy: escapable and inescapable cruelties

Alex de Waal Program Director, Social Science Research Council, United States

Paradoxically, elements of cruelty are intrinsic to the humanitarian enterprise.¹ This paper focuses on some of these. Escapable cruelties arise from technical failings, but the gradual professionalisation of the field and improvements in relief technologies mean that they have been significantly reduced in comparison to earlier eras. Other cruelties arise from clashes among rights, and the tensions inherent in trying to promote humanity amid the horrors of war. These are inescapable and constitute the 'humanitarians' tragedy'. Among them is the individual cruelty of failing to do good at the margin: a clash between the individual's impulses and ideals and the constraints of operating in constrained circumstances. This is a version of triage. In addition, there is the cruelty of compromising dearly-held principles when faced with other competing or overriding demands. There is also the cruelty whereby humanitarians feed victims' dreams that there is an alternative reality, which in fact cannot be attained.

Keywords: conflict, ethics, humanitarian policy, humanitarian principles, Red Cross

Introduction

This paper examines some paradoxes within the humanitarian enterprise, focusing specifically on the ways in which the impulse to ameliorate suffering leads humanitarian workers and institutions into the unwelcome situation of acting cruelly. While professional standards are increasing, thereby reducing suffering, some cruelties are intrinsic to the humanitarian predicament—hence the humanitarians' tragedy.

Rather than a litany of woe, tragedy is properly seen as a clash between rights, determined by a world in which human ideals fail to match the realities of the human condition. The humanitarians' tragedy is both the tragedy of goals that cannot be reconciled among themselves and the inevitable outcome of pursuing ideals amid the most horrific constraints of war and violent social upheaval.

Diverse cruelties lie within the humanitarian predicament. There is the individual cruelty of failing to do good at the margin. There is the cruelty of compromising dearly-held principles. And there is the cruelty of feeding dreams of an alternative but unattainable reality.

The technical proficiency and material resources of the humanitarian enterprise mitigate much needless suffering, but they are never enough to fulfil the rights of victims and survivors. Ironically, global humanitarian resources have never been greater, and technical proficiency has improved. There are still egregious failings in relief programmes but overall effectiveness is immensely better than it was a quarter of a century ago. Humanitarians are much better at saving lives than they used to be—and thereby minimise needless failings of humanitarianism.

Disasters, 2010, 34(S2): S130–S137. © 2010 The Author(s). Journal compilation © Overseas Development Institute, 2010. Published by Blackwell Publishing, 9600 Garsington Road, Oxford, OX4 2DQ, UK and 350 Main Street, Malden, MA 02148, USA

“... both the tragedy of goals that cannot be reconciled among themselves and the inevitable outcome of pursuing ideals amid the most horrific constraints of war and violent social upheaval.”

Alex de Waal

A. de Waal, “The humanitarians’ tragedy: Escapable and inescapable cruelties,” *Disasters* 34, Supp. 2 (April 2010):S120

Tragic choices

- Situations in which all options are morally problematic: whatever is chosen, something of moral significance will have been lost.
- Reflects the insoluble nature of catastrophe

338 *The Journal of Clinical Ethics* Winter 2012

Matthew R. Hunt, Christina Sinding, and Lisa Schwartz, "Tragic Choices in Humanitarian Health Work," *The Journal of Clinical Ethics* 23, no. 4 (Winter 2012): 333-44.

Tragic Choices in Humanitarian Health Work

Matthew R. Hunt, Christina Sinding, and Lisa Schwartz

Tragic choices

- Two prominent examples in the narratives we collected:
 - Competency dilemmas
 - Dilemmas of patient selection

Competency dilemmas

- May result from gaps in staffing or insufficient human resources in humanitarian projects
- Situations when clinicians must decide whether to act near boundaries of their competency

[Prehospital and Disaster Medicine](#). 2013. 28 (5): 502-8.

SPECIAL REPORT

“How Far Do You Go and Where Are the Issues Surrounding That?” Dilemmas at the Boundaries of Clinical Competency in Humanitarian Health Work

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You go from here to there, and here you're specialized in one particular sort of thing, there you may be asked to do all sorts of things outside your specialty. How far do you go and where are the issues surrounding that?
Canadian physician discussing experiences in humanitarian aid work

Abstract

Health professionals working in humanitarian relief projects encounter a range of ethical challenges. Applying professional and ethical norms may be especially challenging in crisis settings where needs are elevated, resources scarce, and socio-political structures strained. Situations when clinicians must decide whether to provide care that is near the margins of their professional competency are a source of moral uncertainty that can give rise to moral distress. The authors suggest that responding ethically to these dilemmas requires more than familiarity with ethical codes of conduct and guidelines; it requires practical wisdom, that is, the ability to relate past experience and general guidance to a current situation in order to render a morally sound action. Two sets of questions are proposed to guide reflection and deliberation for clinicians who face competency dilemmas. The first is prospective and intended to aid clinicians in evaluating an unfolding situation. The second is retrospective and designed to support debriefing about past experiences and difficult situations. The aim of this analysis is to support clinicians in evaluating competency dilemmas and provide ethical care and services.

Hunt MR, Schwartz L, Fraser V. “How Far Do You Go and Where Are the Issues Surrounding That?” Dilemmas at the Boundaries of Clinical Competency in Humanitarian Health Work. *Prehosp Disaster Med*. 2013;28(5):502-508.

Introduction

Competency dilemmas

I have to make a decision. Which is the better of two bad options: having the wrong surgeon operate, or not operating and dying? (ob/gyn)

Sometimes I was asked to do stuff that doctors do and the child died because I didn't do it. I felt that I wasn't a doctor. I felt that I couldn't do it, but it was the only thing to do and the child ended up dying. (Nurse)

Dilemmas of patient selection

Narratives of not providing care to a patient or group of patients due to:

- scarcity,
- public health rationales,
- policies
- organizational mandates

[Public Health Ethics](#). 2010. 3(2): 147-156.

'Playing God Because you Have to': Health Professionals' Narratives of Rationing Care in Humanitarian and Development Work

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Dilemmas of patient selection

“There are a lot of kids with pneumonia that need resources and if you give them the resources they will get better. So I decided not to transfer the kid and he went home. I will always remember that kid. I think I made a right decision. I let him down. I may not have let these other kids down in the sense that those resources were available for others, but I let him down.”

“Even though the ethical choice may have been not to take her and keep the space for somebody else I still feel it was the right thing to do [to admit the patient].”

Dilemmas of patient selection

- Often pulled in multiple directions, never fully resolved

Tragic choices

- Experience distress or regret
“over the frustration of other significant concerns” (Nussbaum, 2001)
- May feel that choice is justified, but still not just

Supporting humanitarian workers for tragic choices

Not a topic “that
humanitarian workers are
trained to anticipate and
cope with.”

(de Waal, 2010)

Supporting humanitarian workers for tragic choices

Phronesis (practical wisdom):
The capacity to deliberate
well and to judge the correct
means for achieving good
ends.

1. Responsive policy-making

- Develop coherent and relevant policy
 - Identify recurrent issues
 - Establish channels for feedback to policy-makers

2. Preparation

- Cases, immersive engagement, simulation
- Stories of struggling with tragic choices
- Mentorship, role modeling



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Here you will find practical and educational material for humanitarian healthcare workers as well as students and scholars of humanitarian healthcare ethics. The website developed out of empirical research on the ethical dilemmas faced by humanitarian healthcare professionals working in humanitarian crises, disasters or areas of extreme poverty. If you want to contribute to the website or provide comments please send us your [feedback](#).

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News

The September edition of the [HumEthNet Reflections](#) newsletter is now available.

New Publication: Hunt, Matthew R, Lisa Schwartz and Veronique Fraser. (2013). "How far do you go and where are the issues surrounding that?" Dilemmas at the boundaries of clinical competency in humanitarian health

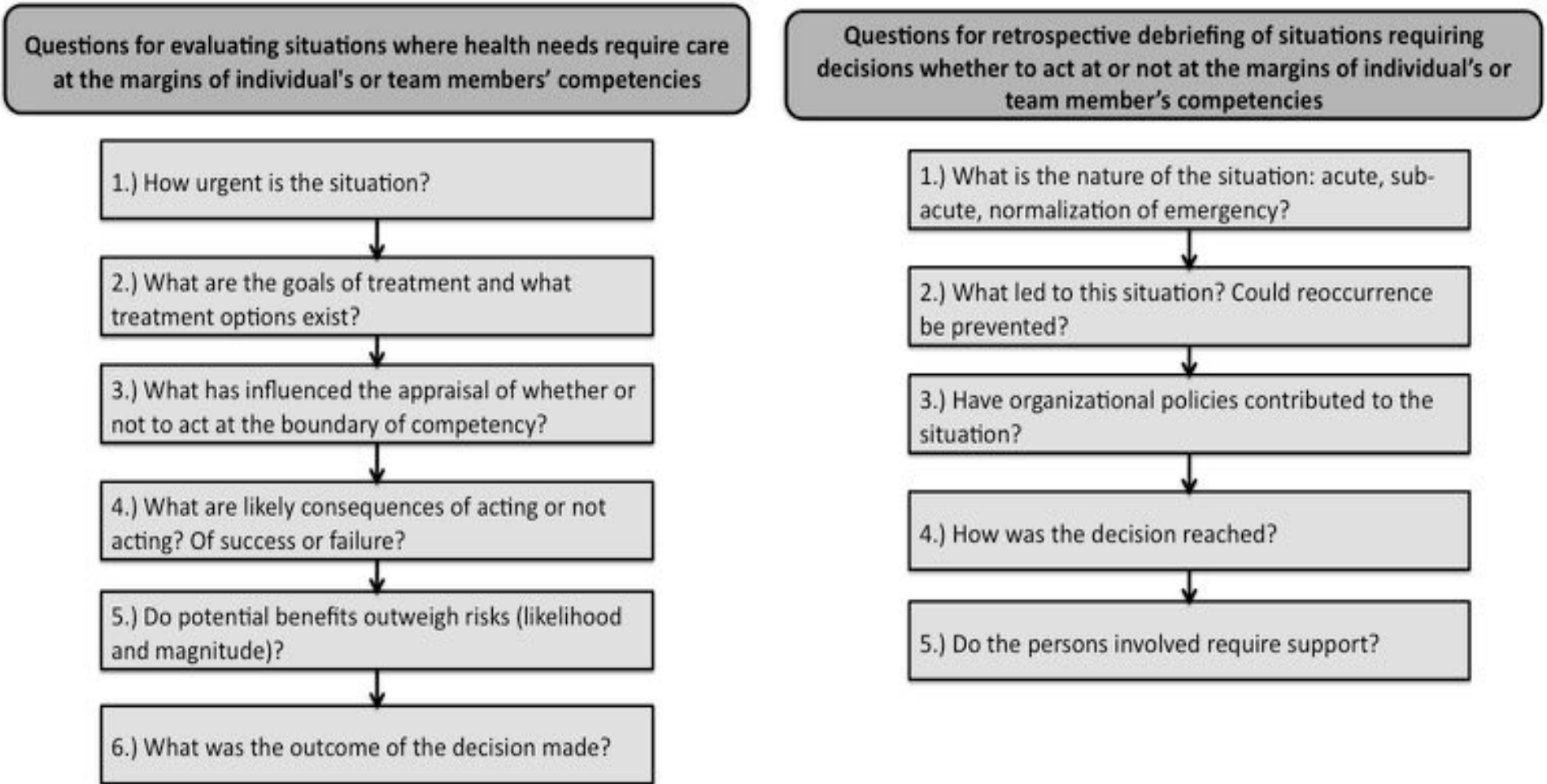
humanitarianhealthethics.net

3. Mutual support

- Team relationships key source of support
- Make and maintain moral spaces
- Share the moral weight of tragic choice?
- “Ethical” debriefing

4. Create tools

e.g. for competency dilemmas...



Hunt, Schwartz, Fraser. (2013). "How Far Do You Go and Where Are the Issues Surrounding That?" Dilemmas at the Boundaries of Clinical Competency in Humanitarian Health Work." *Prehospital and disaster medicine* 28.05: 502-508.



*Between the idea
And the reality
Between the motion
And the act
Falls the Shadow*

T.S. Elliot, *The Hollow Men*



Source: M Hunt

Thank you

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