Case Presentation

Making Decisions Based Upon the Situation

Many years ago, as a junior nursing student, Mary was assigned to observe the labor and delivery department of a small rural hospital. As frequently occurs in small towns, the nurses and physicians were acquainted with many of the women—they knew their backgrounds, home situations, and so forth. During her second day on the unit, Mary attended the delivery of a set of premature twins. After delivering the tiny babies, the physician walked to a nearby room and placed them on a metal utility table. He turned and said to those in attendance, "Nobody is to touch them. This woman has nine children at home. She doesn't need any more babies."

Because these babies were very premature, it is unlikely they would have survived in the best of situations; nevertheless, the nurses struggled with the moral implications. This example raises many ethical questions, and illustrates a case of paternalism and utilitarianism taken to the extreme.

Think About It

Does the End Justify the Means?

- Utilitarianism holds that an action is judged as good or bad in relation to the consequences or outcomes that are derived from it. If the physician were thinking in terms of utilitarianism, what could have been the arguments to support his actions?
- Assume that the twins were rescued. Name as many possible outcomes as you can imagine.
- Name four arguments in support of, and four arguments in opposition to, the physician's decision.
- Considering her position as a student in the hospital, what were Mary's options?
- What thoughts would have gone through your mind if you were in this situation?

Act–utilitarianism

Act-utilitarianism allows for different, sometimes opposing, actions in different situations. For example, while act-utilitarians probably believe that it is best to tell the truth (or keep promises, or avoid killing, and so on), they recognize that there are times when the overall consequences will be better for everyone concerned if this guideline is not followed, even if the rights of some individuals are violated (Beauchamp & Childress, 2012; Smart, 1997). Act-utilitarians recognize that tenets should be used as rough guidelines rather than strict rules.

Rule–utilitarianism

Rule-utilitarianism, on the other hand, suggests that people should act according to rules that tend to maximize happiness and diminish unhappiness. Rule-utilitarianism requires that people in all circumstances tell the truth, keep promises, avoid killing, and so on, because the overall good is maximized by consistently following such rules. The rules are consistent and easy to learn. For example, there may be times when you wonder if deceiving a patient is acceptable. If an elderly patient who was injured in an automobile accident is critically injured and unstable, should you temporarily deceive him about his wife's death? A rule utilitarian would argue that you should not deceive the patient. Even though you are afraid that this patient's health might be threatened if you tell the truth, a widespread use of deception will eventually cause more harm than good. Thus, though rule-utilitarians recognize that in some instances good might result from a particular act that violates the rules, in the end the overall good is maximized by following strict rules in all situations.

Utilitarianism is widely used in the health care system. It is the basis for many policy-level decisions about the distribution of health care services and can be integral to medical emergency triage decisions. Policy makers often attempt to wisely appropriate public funds. The debates about funding are often in the news and include topics on a variety of public programs, such as Medicare, Medicaid, managed care, family planning, pediatric services, mental health, and others. As these programs focus on delivering cost-effective health care to large numbers of people, they serve very specific narrow populations (denying resources to others) and provide or deny very specific services—all based upon utilitarian principles. In emergency situations such as war or natural disasters, utilitarianism may become the default method of making these types of decisions. Consider this e-mail message from a Dallas physician who served on a disaster assistance team set up at the New Orleans airport in the days immediately following Hurricane Katrina. He writes, "We did everything from delivering babies to simply providing morphine and a blanket to septic and critical patients, and allowing them to die" (Vankawala, 2005, p. 13). He continues,

Our busiest day, we off-loaded just under 15,000 patients by air and ground. At that time, we had about 30 medical providers and 100 ancillary staff. All we could do was provide the barest amount of comfort care. We watched many, many people die. We practiced medical triage at its most basic—"black-tagging" the sickest people and culling them from the masses so that they could die in a separate area. (Vankawala, 2005, p. 8)

Nursing organizations and schools of nursing across the United States also provided emergency care and triage during the hurricane aftermath.

The greatest good