

Teaching Ethics as a Writing-Intensive, Ability-Based Course

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INTRODUCTION

Pharmacy educators traditionally strive to provide students with a foundation in the social, ethical, legal, and economic issues involved in practice management and the provision of pharmaceutical care. Pharmacy graduates must be able to reach and render ethical decisions even when their personal values conflict with these decisions, and they must be able to resolve such conflicts without compromising optimal care for patients (1). The importance of ethics content in pharmacy education has been well documented, and a variety of enabling objectives and teaching methodologies have been suggested to achieve this goal (2).

The *Report of the AACP Focus Group on Liberalization of the Professional Curriculum* has drawn attention to the implementation of ability-based outcomes education (3). An *ability* is defined as the integration of knowledge, skills, and attitude. While outcomes related to valuing and ethics, as promulgated by professional pharmacy organizations, may be fairly consistent, the methods employed by different pharmacy schools for achieving these outcomes may vary.

Critical thinking and ethical decision-making abilities were among those used to assess achievement in the course described in this paper. The Biomedical Ethics elective at the St. Louis College of Pharmacy was de-

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signed to provide a forum for articulation of the relationship of values and ethics to ideas and issues in the area of health care and to develop communication and problem-solving strategies to resolve ethical dilemmas. This course used writing to help students develop tools for self-examination and communication. Whereas oral arguments of ethical issues often tend to be visceral in nature, a written format encourages the introspection required for the development of abilities in critical thinking, communication, self and social awareness, valuing, and ethical decision-making.

COURSE OUTCOMES

Upon conclusion of the Biomedical Ethics course, students are able to:

- Construct and utilize a systematic decision-making system to resolve ethical dilemmas.
- Evaluate issues and positions of self, peers, and contemporary ethicists through application of major ethical theories and principles.
- Effectively use writing to analyze and evaluate issues in health care.
- Communicate effectively in writing.
- Identify their own value systems.
- Analyze how their own values and beliefs affect acceptance or rejection of others' ideas and values.
- Identify moral problems in medical research and practice and apply ethical theories and principles to evaluate those problems.
- Articulate values and ethical principles promulgated by the pharmacy profession.
- Apply ethical principles to case studies so as to stress the provision of pharmaceutical care.

METHODS OF INSTRUCTION

Achievement of ability-based outcomes requires an integration of knowledge, skills, and attitude. A knowledge base in ethics is conveyed by using a traditional lecture format, during which a foundation in general ethical theories and principles is laid. The ethical principles of autonomy/paternalism, veracity, nonmaleficence, beneficence, confidentiality, and justice are introduced. The lecture format is also used to introduce the codes of ethics for different health-care provider organizations (American Medical Association, American Pharmaceutical Association, American Nurses' Association) and to expose students to ethical dilemmas within

the contexts of health care provider-patient interactions, medical experimentation, abortion, euthanasia, reproductive rights, and allocation of scarce resources (Appendix A).

Students practice application, interpretation, communication, analysis, integration, and decision-making skills in small-group discussions and in writing assignments. Case studies are analyzed using small-group discussion. Groups are alternately randomly chosen by the instructor or self-selected by the students. Small groups also serve as a forum in which students develop a "Code of Ethics" for the educational institution of which they are a part (Appendix B).

Writing assignments provide a tool for student-active learning. They are designed as a method for students to practice the skills and abilities detailed in the course outcomes. Formative assessment is provided by the instructor for each writing assignment. Students have the opportunity to resubmit their work for additional comments prior to submission of the final drafts. The College Writing Center is also available for students who need assistance. Students write three in-class essays in which they react to specific ethical dilemmas (Appendix C). In addition, each student turns in two reflection papers based on his or her analysis of a paper from contemporary literature. Students may choose their articles, subject to instructor approval, for the first of these papers. Choices for the second reflection paper are confined to papers selected by the instructor from recent issues of the *Hastings Center Report*.

Role plays are employed to facilitate the development of attitudes of empathy and caring. Students participate in two role plays during the semester. The issues examined are: 1) patients' rights in deciding to decline medical treatment; and 2) the reproductive rights of indigent women.

Students provide written assessments of their expectations and concerns at the onset of the course. At the conclusion of the class, students submit brief essays (anonymous) about their personal reactions to participation in the class.

ASSESSMENT

Both formative and summative assessments of writing assignments employ the performance criteria list described below.

Performance Criteria for Reflection Papers (2)

- summary of paper
- analysis of author's position

- evaluation of issue(s) through application of ethical theory and principles
- synthesis of critical response
- effective written communication skills

Performance Criteria for In-Class Essays (3)

- identification of ethical dilemmas
- analysis of possible options, construction of a logical decision-making system to arrive at an appropriate course of action
- effective written communication skills
- articulation of the values that undergird pharmaceutical care
- application of these values to case studies

Midterm and final take-home examinations provide summative assessment and are assessed as follows:

Performance Criteria for Midterm and Final Examinations

- identification of ethical dilemmas
- identification and application of ethical principles
- application of personally constructed ethical decision-making system to resolve a dilemma
- critical evaluation of personal and alternate viewpoints
- logical argumentation
- demonstration of effective writing skills

Performance Criteria for Group Assignments

- provide feedback for their peers on group assignments
- thoughtful analysis of strengths and weaknesses of peer's work
- provision of constructive feedback to peers

CONCLUSIONS

In their evaluations, students commented positively about the “real life” issues raised in the course. In particular, issues of cost/benefit analysis, the rights of patients to have expensive therapy, and the rights of patients in a managed-care setting were mentioned. Students entered this class thinking that any therapeutic modality was available to any patient

based on medical need alone. Conflicts that arise when the welfare of a single patient must be balanced with the welfare of the many were frequently discussed. Thinking and writing about the APhA Code of Ethics for Pharmacists was reported by some students to have been an important mechanism for self-awareness. The use of pharmacy specific case studies regarding the dispensing of abortifacients and of morphine overdoses to assist in suicide made the issues of abortion and physician-assisted suicide "real" to the students. An objective course evaluation revealed that the vast majority of students either agreed or strongly agreed that the outcome goals had been met (see Table 1).

TABLE 1. Biomedical Ethics Student Evaluations

Key: 5 = Strongly Agree; 4 = Agree; 3 = Neither Agree nor Disagree;
2 = Disagree; 1 = Strongly Disagree; n = 20

The course helped me to:

- | | |
|---|-----|
| • Construct and utilize a systematic decision-making system to resolve ethical dilemmas | 4.0 |
| • Evaluate issues and positions of self, peers, and contemporary ethicists through application of major ethical theories and principles | 5.0 |
| • Effectively use writing to analyze and evaluate ethical issues in health care | 4.5 |
| • Communicate effectively in writing | 4.0 |
| • Identify my own value system | 4.0 |
| • Analyze how my own values and beliefs affect acceptance or rejection of others' ideas and values | 4.5 |
| • Identify moral problems in medical research and practice and to apply ethical theories and principles to evaluate those problems | 4.0 |
| • Evaluate issues and positions of self, peers, and contemporary ethicists through application of major ethical theories and principles | 4.0 |
| • Articulate values and ethical principles promulgated by the pharmacy profession | 4.0 |
| • Apply ethical principles to case studies so as to maximize the provision of pharmaceutical care | 4.0 |

Teaching ethics as a writing intensive, outcomes-based class was extremely labor intensive for both students and faculty. Students experienced difficulty in managing their time and often turned in first drafts that had scarcely been proofread. The instructor experienced difficulty in returning all the formative assessments within a time frame that left enough time for student rewrites. The responses to the reflection papers proved the most challenging. Students had great difficulty, initially, in articulating and evaluating authors' positions. This improved with repeated attempts, but many students never reached a satisfactory level of performance.

The use of role playing as a teaching tool to develop empathy and stimulate communication is particularly effective in the ethics classroom as described in Chapter 4. Students' awareness of their values and a sensitivity to those of their classmates were encouraged by a random assignment of roles. Thus, students often had to argue a point of view other than their own.

Writing as a methodology for enhancing learning was effective in this class. Presentation of ethical dilemmas in the classroom prompts students to identify, clarify, and reflect upon their own value systems. The use of a written response to an ethical dilemma encourages students to develop the level of introspection needed to make informed ethical choices (4).

Despite the high levels of time and energy required, teaching ethics as a writing intensive, outcomes-based course can be a rewarding experience for faculty and students because it encourages the development of respect between instructor and students, and among students themselves. Assessment based upon desired performance criteria helped students to take responsibility for personal outcomes. This can be an important component in building a firm foundation for future pharmacy professionals.

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APPENDIX A

Course Outline (Abbreviated)**Topics**

- Introduction and General Considerations
- Ethical Theories
- Introduction to Major Moral Principles
- The Nature of Ethical Dilemmas
- Pharmacy Ethics
- Patient/Health-Care Professional Interaction—Moving to a Patient-Oriented Focus
- Medical Experimentation
- Abortion
- Euthanasia
- Reproductive Rights
- Allocation of Scarce Resources

APPENDIX B

Biomedical Ethics: In-Class Assignment

The Task: Your job is to develop, in concert with your classmates, a St. Louis College of Pharmacy Code of Ethics. To achieve this goal you will need to consider:

1. The nature of the relationship among
 - a. Students
 - b. Students and teachers
 - c. Teachers
 - d. Students and administration

We have discussed several ways in which ethicists categorize relationships including contractual, engineering, priestly, covenantal, etc. You may use these or create your own.

2. The duties and responsibilities of students, teachers, administrators. Use the ethical principles you have learned to describe these.
3. The consequences (if any) that should be in place to enforce the duties and responsibilities described above.

APPENDIX C

Case Studies

Case 1

Mary Doright, R.Ph., works at Everbusy Pharmacy. Although Mary has two technicians to assist her, the volume of prescriptions makes it difficult to take the time to counsel patients about their prescriptions. (This is, of course, a totally fictitious scenario!) On a particularly busy day, Mary has new scripts for three patients, all of whom are waiting impatiently. Mary feels that she ought to talk to each of them. The pharmacy has advertised prescriptions filled in fifteen minutes or they're free. One of the patients has threatened to take her business elsewhere; the other two are demanding faster service or their money back. What should Mary do?

In your response, be sure to:

- identify the ethical dilemmas;
- describe the ethical principles and duties in the Code of Ethics for Pharmacists that are relevant in this case and apply these;
- analyze possible options;
- construct a decision making mechanism, using either utilitarian or deontological theory to arrive at an appropriate course of action;
- proofread (not only for grammar, but also organization and clarity)

Case 2

Ray M. Bursement, R.Ph., has been operating an independent pharmacy for 25 years. He has developed a trusting, caring relationship with his patients, and they depend on him for much of their medical advice. However, every year, the struggle to stay afloat financially becomes more difficult. Pharmaceutical Services, Inc., a provider of a generic antihypertensive medication has a plan for participating pharmacists which offers reimbursement for cognitive services if patients change from the name-brand version to PSI's less expensive but equivalent form of the drug. PSI does not define "cognitive services" and requires documentation of prod-

uct switch. PSI also asks for a list of physicians who prescribe the name brand. Ray has long been an advocate for pharmacy reimbursement for cognitive services, and feels this is a good way to get started. Is he doing the right thing?

Assume the two products are equivalent (that is, of the type that would normally be substituted) but not proven to work the same in all patients. Cognitive services include any services rendered by the pharmacist to the patient (i.e., counseling, monitoring, referral) beyond filling of a prescription.

Your answers should address (but not be confined to): What are Ray's duties? Describe these in terms of ethical principles and the Code of Ethics for Pharmacists. Consider the last maxim in the Code regarding just distribution of health-care services. What are possible consequences of Ray's decision? Provide either a utilitarian or a deontological argument to support or refute Ray's decision. Should reimbursement for cognitive services be regulated? If so, by whom?

Case 3

The Ninth District Federal Court has overturned a state law that makes physician-assisted suicide a crime, using essentially the same argument used by the U.S. Supreme Court in *Roe vs. Wade*, i.e., that the right to private medical decisions (in this case, the decision to end one's life) is protected by the Fourteenth Amendment guarantee of privacy. Pharmacist Odie Mohfeen owns and operates the only pharmacy in a rural area. He knows that Mrs. Ellerman is suffering from terminal cancer. Yet, when her husband presents him with a prescription for morphine with a *signa* that reads "take as directed," he doesn't know what to do. He asks Mr. Ellerman if he and his wife understand what the drug will do and Mr. Ellerman answers, "yes." Odie is personally opposed to physician-assisted suicide, and he doesn't want to get involved in this one even though he's known the Ellermans for a long time. What is the appropriate course of action?