This book brings the powerful insights of Continental philosophy to bear on some of the most challenging difficulties of ethical life. Currently philosophy is being radically transformed by questions of how to live well.

Principles of practical management of nutritional care towards the end of life. Provision of oral intake also provides the opportunity for personal contact between patient and family or carers. If there is conflict between the team and family or advocate Table 1 , recourse to legal opinion may be required. Fortunately, most decisions on ANH and consent are settled without dissent but consensus cannot always be achieved. In advanced dementia, there is little or no evidence to support the achievement of any of these objectives using artificial nutritional support, rendering ANH a potentially futile and therefore unethical treatment capable of greater harm than benefit. Whenever possible, people with NDs known to lead to cognitive impairment should be actively encouraged to make an advanced decision MCA in writing, with particular reference to their preferences should cognitive function and swallowing deteriorate to the point of unsafe swallow. Nutritional support is never an emergency 6 and iv hydration can be provided to allow time to determine the existence of an advanced directive. Verbal wishes expressed via a concerned relative have no legal standing. Usually, the wishes concur with medical advice to avoid ANH. It is not necessary to seek legal opinion in most non-persistent vegetative state PVS cases except where major dissent exists between relatives and the medical opinion. Previous Section Next Section Nursing homes When ANH is indicated and transfer imminent there is often controversy over the route of nutritional support. The RCP working party 1 has made the following recommendations: There should be a careful assessment of the need for ANH. Assuming feeding is indicated â€¦ 2. A trial of NGT should be carried out with a nasal halter if necessary. The RCP report states clearly that: If a PEG is considered unethical, a policy of risk management must be deployed. Medical care is full of uncertainties. Nursing homes should be encouraged to accept the increased risk associated with oral feeding in preference to demanding a PEG in advanced dementia. In the Bland case, it was considered that continued ANH was burdensome to the patient and, for the first time, it was legally stated that death could be in the best interests of the patient. The recent discovery of cortical responses in PVS using magnetic resonance imaging may reopen this debate. Recovery must always be considered possible, so ANH should be offered until swallowing recovers sufficiently for ANH withdrawal. Attention to environment and food consistency may permit avoidance of ANH. Early PEG insertion should be discussed with the patient before there is critical decline in respiratory function. In multiple sclerosis, cognitive function may remain intact and early PEG may prolong life if swallowing is unsafe. Cerebral palsy in children or adults, especially when associated with epilepsy, is an appropriate indication for PEG which may transform quality of life. PEG can improve survival in oropharyngeal malignancy and decrease morbidity, provided that disease is not advanced. Royal College of Physicians.

Chapter 2 : Ethics and artificial nutrition towards the end of life

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End of Life References This research Web page resource focuses on end-of-life care. Although end-of-life care is often closely connected with medical services and facilities, social workers, with our history of home-based and family-oriented services, have been in the forefront of end-of-life services whether through hospice care or in nursing homes, hospitals, and emergency waiting rooms. Social workers advise families about residential alternatives, facilitate links to financial resources such as Medicaid, case-manage the multiple providers in complex situations, and counsel families who at times may be geographically distant from their dying relative. With the increasing numbers of aging individuals and the increases in life expectancy of the very old, society finds that many of the supportive persons relating to these aging individuals are also elderly. Although end-of-life care is often thought to be synonymous with geriatric services, it also focuses on sudden death, unexpected illness, and anticipated death from illnesses at earlier ages, including childhood. A systemic approach to end-of-life care addresses not only the identified client, but also the family and other caregivers, including the professionals involved. Increasing attention to end-of-life care also may focus on palliative care and pain management. However, the topic of concern here is primarily focused on that which occurs during the time before death. This Web page provides an overview of social work-related research into issues involved in endof-life care and decision making. A list of Web site resources and social work-related research publications is provided. NASW is involved in a number of initiatives regarding end-of-life care. A December Practice Update, Social Workers in Hospice and Palliative Care Settings, provides an overview of social work practice in this arena as well as references and resources. The following is from the editorial introduction to that issue: End-of-life care is not a new arena for social workers who historically have provided care for dying individuals and their families in a variety of settings. What is new is that end-of-life care is finally receiving the attention that it deserves. This publication can be found online at http: The Guiding Principles include this perspective: Social workers have unique, in-depth knowledge of and expertise in working with ethnic, cultural, and economic diversity; family and support networks; multidimensional symptom management; bereavement; trauma and disaster relief; interdisciplinary practice; interventions across the life cycle; and systems interventions that address the fragmentation, gaps, and insufficiency in health care. These are critical areas for implementing change in palliative and end of life care. Social workers also have expertise in analyzing, influencing, and implementing policy change and development at local, state, and federal levels that can be used to make important improvements in the care of patients living with life-limiting illness and the dying. Social work research in the care of the dying is also developing and addressing many previously overlooked areas of end of life care, such as issues concerning ethnic, cultural, and economic diversity, substance abuse, incarceration, interventions at different life cycle stages, problem-solving interventions, and intervention in community contexts. Among the outputs of the PDIA has been the creation of Social Work Leadership Awards to promote innovative research and training projects that reflect a collaboration between schools of social work and practice sites that will advance the ongoing development of social work practice, education, and training in the care of the dying. These awards promote the visibility and prestige of social workers committed to end-of-life care and enhance their effectiveness as academic leaders, role models, and mentors for future generations of social workers. In releasing a new publication in October , Transforming the Culture of Dying: Over the course of nine years, PDIA created funding initiatives in professional and public education, the arts and humanities, research, clinical care, and public policy. PDIA and its grantees have helped build and shape this important and growing field, and have placed improved care of the dying on the public agenda. Over the past decade, foundations have had an enormous impact on the development of palliative and end-of-life care services in the United States. Caregivers and patients are learning that isolation, pain, and inadequate care need not define the dying process. Click on the Web site below and scroll to pp. The collective

PDIA Social Work Leaders have established palliative and end-of-life care as a specialty area within the social work profession. Improvements in medical science and health care have gradually changed the nature of dying. Death is no longer likely to be the sudden result of infection or injury, but is now more likely to occur slowly, in old age, and at the end of a period of chronic illness. As a result, a demographic shift is beginning to occur that will include an increase in the number of seriously ill and dying people at the same time that the number of caregivers decreases. To meet this challenge, the best that science can offer must be applied to guarantee the quality of care provided to the dying. Notable among these activities, the National Institute of Nursing Research NINR , part of the National Institutes of Health, began a series of research solicitations that focused on issues related to the end of life. Topics of the NIH initiatives have included: The purpose of this conference is to examine the results of these many efforts and to evaluate the current state of the science. They were selected to demonstrate the range of issues relating to end-of-life care. Social Work, 49 3 , Recent advances in health care technology have increased the number of health care decisions made by acute care patients and those who act on their behalf, known as health care surrogates. Designed to assess the willingness of adults to perform and convey the duties required to communicate patient preferences, the scale offers a promising tool for use by social workers in health care settings. Development, evaluation, application of the new measure, and future research needs are discussed. This study examined factors that contribute to consideration of hastening death among people with life-threatening illnesses. A discriminant function analysis was conducted to determine what factors distinguished between people who had self-identified as either contemplating or not contemplating hastening their deaths. Of the variables examined, depression, social support, and hope distinguished between the two groups. Pain and anxiety appeared to play no role in distinguishing between the two groups. The results are presented and implications for social work practice and research are discussed. Data were collected from nurses and 61 social workers at major hospitals across Israel. Whereas nurses reported being more involved in the daily care of terminally ill patients, social workers reported being more involved in discussions with patients and family members. Nurses were more willing than social workers to use artificial feeding and less willing to use mechanical ventilation and CPR for all conditions. Social workers expressed stronger beliefs about their involvement in end-of-life issues. These findings, which reflect the differences in the professional values and experiences of both groups, encourage the use of interdisciplinary teams to improve end-of-life decision making. Health-and-Social-Work, 29 1 , The respondents held overwhelmingly favorable attitudes toward hospice philosophy and care, yet the average proportion of terminally ill patients whom they referred to hospice was only The factor identified most frequently was resistance from families because of the requirement that hospice patients discontinued active treatment. Complexity of Decision-Making in a Nursing Home: Journal of Gerontological Social Work, 42 1 , Since the Patient Self-Determination Act became law in , nursing homes routinely address advance directives with all residents. This study investigated the implementation of end-of-life care wishes of residents in one nursing home in Florida. Two-thirds of the residents had either completed a living will or designated a health care decision-maker, and Findings suggest that in 94 percent of the cases advance directives were followed, and that professional social work activities contributed to the high rate of compliance. Death Does Not Become Us: This paper reviews the issues of death and dying from the viewpoint of sociological research and seeks to identify the ways death and dying have been treated within the research literature on living with intellectual disability. The social issues of death, dying, and bereavement represent important but neglected research areas, and such issues need attention both for practical reform and for deciphering what living with intellectual disability entails. The difficulties which life poses for people with intellectual disabilities may well persist in the times before and after death. As research issues, they offer not only potential practical significance, but also a means of determining the social status and value of people with intellectual disabilities. It is suggested that these issues have been discounted with some important consequences for the way intellectual disability is perceived. Important areas for research in this arena are highlighted. British Journal of Social Work, 32 4 , Sixteen social workers in Israel were interviewed about their experiences with and attitudes towards various forms of euthanasia, as well as the meanings they ascribe to them. Using phenomenological analysis, seven themes were identified, emphasizing individual, interpersonal,

organizational, social, and therapeutic considerations, and suggesting a holistic and integrative structure of the phenomenon. The themes were arrived at by identifying distinctions and similarities between different forms of euthanasia. Two themes suggesting similarities were revealed: Given their unique position, social workers should participate in legal, social, and therapeutic discussions concerning end-of-life decisions for the benefit of clients, their families, and health-care providers. Berkman, Peter Maramaldi, Emily A. Research has learned much in the past 40 years about the factors critical in a gerontological social work assessment. However, assessment must be constantly readdressed, because the context of health care changes and the research technology that enables the study of factors critical to the assessment process become more sophisticated. University of Kansas , PhD, Aug. A qualitative study based on interviews with 16 terminally ill older adults with a high level of quality of life and their caregivers was conducted to examine the meaning of psychosocial and spiritual well-being during the final months and the process to attain it. Six primary contributing components to their psychosocial and spiritual well-being were identified: The findings highlight different ways that these elders grounded their resiliency: The author urges the profession to envision social work with terminally ill older adults beyond a viewpoint of coping and adaptation. Implications link the re-conceptualization of quality of life and identified areas of resiliency. Analyzing End-of-Life Care Legislation: A Social Work Perspective. Social Work in Health Care, 33 1 , Several policy approaches are currently being considered in an attempt to organize a national response to the crisis surrounding quality end-of-life care. Recent health care efforts aimed at supporting individuals facing advanced illness are marked by debate over assisted suicide, untimely referrals to hospice care, inconsistent adherence to advance directives, and substantive amounts of unrelieved pain in the end of life. Social workers require a clear understanding of the current political and social climate if they are to navigate the ethical dilemmas as they are presented in end-of-life care. This article discusses recently proposed policy response to the various political and social controversies surrounding end-of-life care for individuals facing advanced illness. The analysis suggests criteria for evaluating end-of-life policy in general and offers a framework for evaluating proposed legislation. Suggestions for making end-of-life policy more effective and areas for future research are proposed. Finally, the implications of this policy analysis for social work are delineated. Values Underlying End-of-Life Decisions: A Qualitative Approach Leichtentritt, R. Health and Soci al Work, 26 3 , The purpose of the study discussed in this article was to reveal the values that would receive priority attention when considering end-of-life decisions. Nineteen elderly Israelis and their 28 family members participated in individual interviews that were analyzed using a hermeneutic phenomenological method. Analysis of the transcripts indicated that participants considered a unique set of value priorities that raised different considerations in each of four domains of life:

Chapter 3 : Project MUSE - Difficulties of Ethical Life

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Bernadine Mills Posted on July 13, The Ethical issues in the world today Have succeeded in successfully crossing different barriers and becoming more and more present in social spaces such as family nuclei and schools, even to break into the major spheres of politics and the global economy. With the emergence of new technologies, the advance of science and the constant trend towards consumerism and obtaining material wealth, man has gradually lost his personal, work and above all social ethics. The way people act with themselves and with those around them, as well as their rights and responsibilities reflect today a great lack of moral conscience. It is ethics that little unconscious voice that points out what is right and wrong and defines each individual how to live a good life. However, despite the existence of an ethical code of conduct, today there are innumerable many ethical problems presented by global society. Whether in the personal, academic, political, economic, health, technological and even environmental, ethical problems continue to emerge with great force and the list below is a clear reflection of this. Main ethical issues around the world Existence of diverse cultural and moral systems Commonly called the problem of cultural relativism, it mentions how ethical principles vary from one culture to another. One of the main ethical problems is that there is no single definition as to what is ethical for each culture. Just as some societies tend to venerate multiple gods, practice polygamy, and do not consume some animals because they are considered sacred, Western beliefs, for example, have a different perspective of perceiving the world. Globalization of poverty The advance of new technologies and globalization have managed to connect to the world as never before, however, they have increased social inequalities and concentrated wealth in the hands of a small part of the population. Hence, while some have elevated levels of quality of life, others still suffer from basic deficiencies such as lack of potable water, hunger and education. Inequality in access to health care As mentioned by the World Health Organization, every human being should have the right to enjoy the highest level of health that can be achieved and have an environment that allows him to take care of himself physically and mentally. Hence, inequality in access to health care is seen as a major ethical problem. What about the rest? Undoubtedly, lack equity and social justice. Absence of political freedoms Although democracy has managed to impose itself as the best system of government at the global level, today many citizens lack freedom of expression and association, security and access to quality public institutions. In the same way that many governments continue to carry out corrupt practices regardless of the serious ethical and economic consequences that this entails for their citizens. The latest case of more recent corruption has been reflected in Brazil where bribes, money laundering, thousands of unemployed people and protests testify to the growing lack of ethics in politics. Increase in terrorism and wars Attempting against the lives of others justifying this continues to be the fundamental premise of terrorist groups and some politicians, where the former base their actions on religious principles, and the latter in the pursuit of global security. However, hundreds of thousands of citizens continue to be victims of such practices and attacks. The constant loss of civilians has become a serious ethical problem today. This crisis points to the great lack of environmental ethics that citizens currently possess, since all the problems that present the planet today such as pollution, global warming, acid rain, deforestation and the greenhouse effect have been caused by the lifestyle controlling. The ecological crisis is more latent today than ever, and an ethical conscience that seeks to contribute positively with the environment is necessary. Rejection on the basis of race, identity or culture, as well as discrimination based on the preference of certain sexual orientations, or hatred of foreigners, continue to be important ethical problems today. The refugee crisis in Europe is a good example of this, where the principle of humanitarian assistance has been set aside and ethical principles have been left behind with only national security privileged. Animal cruelty Today, despite the long road that the organizations that protect animal rights have traveled, much remains to be done. Hundreds of animals are used every year for scientific, military and sexual experiments, with most animals being

slaughtered or injured. Although zero-cruelty campaigns have achieved great success, many companies continue to use defenseless animals in inhuman tests. Ethics and respect for the life of every being, is still an ethical problem that not everyone sees with great relevance. Bioethics attacks Although there is already a whole branch of study that analyzes the ethical and moral perspective of medicine and biology, in vitro fertilization and genetic manipulation constitute serious ethical problems today. The search for the perfect human being and the alteration of their genes with the aim of improving the human species by modifying the genetic heritage of a living being has been seen as a crime against human dignity. Equally issues such as abortion, birth control or the right to euthanasia are great ethical dilemmas that as science advances more are questioned. Growing use of artificial intelligence Technology has managed to open new horizons, just as it has connected thousands of people breaking the border barriers of space. However, the use of robotics and the incorporation of machines in industries and companies is increasingly being observed in order to make production effective, a fact that is generating job losses and valuable human capital. The growing use of artificial intelligence is seen as a major ethical problem as the human being has passed into the background and millions of jobs will be lost. Retrieved on July 6, from bbc. The countries that improved the most and made worse in terms of corruption according to Transparency International. Top 9 ethical issues in artificial intelligence. Retrieved 7 July from World Economic Forum weforum. American Academy of Arts and Sciences. Retrieved on July 7, from amacad. What are the 10 biggest global challenges? These are the best sanitary systems in the world. Retrieved on July 7, from ticbeat. Health and human rights. Retrieved on July 7, from who. Poverty Facts and Stats. Retrieved on July 7, from globalissues. An answer for the classroom. Retrieved on July 6, from generals. Retrieved on July 6, from ethics. Global Challenges for Humanity. Retrieved July 7, from millennium-project.

Chapter 4 : Difficulties Of Ethical Life (perspectives In Continental Philosophy) Download

ethical life is a "better" life? Crucial junctures in this development of phi- losophy have frequently been shaped by the challenges of ethical thought.

While some have the courage to speak up or take action, others do not. Pavlish found nurses also were concerned that patients and families were not fully informed about treatment options and their clinical prognosis and whether the patient voice was represented. For instance, advance directives were not being followed because families wanted something else. Nurses often come to Walton with concerns about informed consent, pain and going beyond a common goal, but dilemmas in nursing ethics are not limited to end-of-life care. The Work Environment Nurses report communication difficulties and workplace bullying and violence as serious work environment ethical dilemmas, Turner said. She is developing models and tools to allow such discussions to take place where everyone can feel comfortable speaking up. Did the patient or family feel cared for? Did you learn something? Priorities also are reset as new patients arrive and colleagues need something. As nurses develop and gain experience, they become better at that. Technology keeps evolving and blurring traditional values about privacy and boundaries. Education about what is available and how it can be use appropriately, without causing distress to patients, can help practitioners with this ethical issue, Turner indicated. Other Nursing Ethics Concerns Cultural diversity and caring for people with different values and traditions, and accepting their rituals, can present challenges in the practice setting, Turner explained. Education can help address this type of scenario. Access to care and affordable and equitable care present ethical dilemmas for nurses as they try to make that happen in their communities. Nurses working in non-acute care settings, such as schools and prisons, have concerns related to bedside nurses but they can differ, Turner explained. For instance, some school nurses are now dealing with the fallout from legal actions in their states that now allow untrained lay people to administer insulin and other medications to students. Additionally, parents opting to not vaccinate pose a challenge for school nurses. She explained that ethical concerns may change as the nurse matures in his or her role. Ulrich discussed the importance of education in nursing programs to prepare undergraduate and graduate students for clinical practice. The Joint Commission requires nursing ethics resources be available--be it a committee, an individual or a community organization, Turner said. She advocated for more creative solutions. At Penn, nurses generate between one-third and one-half of the ethics consults. In fact, having conversations with the health care team and holding family conferences can help ease the ethical conflict, Pavlish reported. Walton made the argument for moral advocacy, speaking up and discussing options early. Originally published on NurseZone. Start Your Job Search.

Chapter 5 : The Top Nursing Ethics Challenges for Nurses | NurseZone

Summary. This book brings the powerful insights of Continental philosophy to bear on some of the most challenging difficulties of ethical life. Currently philosophy is being radically transformed by questions of how to live well.

Additional Information In lieu of an abstract, here is a brief excerpt of the content: From its origins, philosophy has made a claim to have a privileged relation to this task of thinking and living an ethical life. Only religion has made an equally serious claim on how it is that we are to understand and practice the ethical life. As a result of this deep kinship, the history of philosophy has, at crucial points, been shaped by the desire to pose and answer questions of ethical life: What does such a life mean? How are we to understand the meaning of ethicality? What are the obstacles to ethical living? Crucial junctures in this development of philosophy have frequently been shaped by the challenges of ethical thought and life. The assumption driving this volume is that the present historical juncture is precisely such a moment when philosophy is being radically challenged by questions of ethical life. There seem to be two reasons for this. First, the tradition of philosophy is undergoing fundamental transformations. One speaks more frequently of the end of philosophy than one does of its lively future, and there is a strong sense, since Friedrich Nietzsche, that the inherited traditions of philosophy are no longer tenable and need to be radically critiqued. Second, the structures and conditions of life have been radically altered as well. Technology and globalization have changed the possibilities of life and death; science is changing the way we perceive the universe and even the character of life itself; political events and wars PAGE 1 In short, the movement of history and the developments of culture and knowledge seem to have outstripped the capacity of traditional forms of reflection on the ethical life to understand how we are to live well and justly. Ethical life has always been difficult, but it is difficult in new and challenging ways at this historical juncture. This volume gathers a diverse group of philosophers who share the assumption that ours is an especially challenging moment for anyone concerned with the questions of ethical life. In different ways, they address what each takes to be a crucial question that needs to be addressed if thinking is once again to lay claim to having real and original insights into the task of living an ethical life. The concern in each case is to ask about the philosophical significance of these transformations of our times. The essays in this volume address a wide, but nonetheless clearly connected , set of issues relevant to this project: Some of the questions addressed are specific to our times; some are ancient questions but with quite contemporary twists. Part I begins with questions about the nature of ethics itself. Scott examines goodness in the context of moral virtues. Arguing that the quality of goodness depends on its being recognized as good, Scott teases out the vulnerability of goodness and the resulting need for the good to vigilantly preserve and promote it. For Scott, the desire to be good can be motivated and fulfilled by orders of behavior and meaning that are thought of as immoral and perverse. The desire for goodness, in other words, is not necessarily governed by goodness itself. If goodness can fall under the jurisdiction of motivating values such as revenge, then perhaps it is worth exploring a way of living that is neither good nor bad and thus can be responsive to the gift of time that affirms the impossibility of thorough completion. You are not currently authenticated. View freely available titles:

Chapter 6 : 10 Ethical Problems of the Present World | Life Persona

And should we assume that an ethical life is a better life? This book brings the insights of Continental philosophy to bear on some of the challenging difficulties of ethical life. Read more.

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Chapter 7 : Download Difficulties Of Ethical Life

The Ethical issues in the world today Have succeeded in successfully crossing different barriers and becoming more and more present in social spaces such as family nuclei and schools, even to break into the major spheres of politics and the global economy.

Chapter 8 : Activity 7: Ethical issues & end of life | PCC4U

Difficulties of Ethical Life / Edition 3 This book brings the powerful insights of Continental philosophy to bear on some of the most challenging difficulties of ethical life. Currently philosophy is being radically transformed by questions of how to live well.

Chapter 9 : End-Of-Life Care | Social Work Policy Institute

Martha Turner, PhD, RN-BC, assistant director of ANA's Center for Ethics and Human Rights, reported that the work environment, integrating genomics and genetics into practice, and end-of-life issues and palliative care round out the top three ethical dilemmas nurses report.