Chapter 11
Principles of Professional Ethics

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Concept of Professional

Have you ever wondered why medical doctors, nurses, lawyers, and engineers are regarded professionals? Have you ever asked, what are the differences between professional disciplines and non-professional disciplines or between a professional person and an amateur? Many students assume that the difference is in the ease in getting a job or the salary received. Or that professionals are more important or better off. This is not true in all cases. The conditions that make the professionals different from the non-professionals are: 1) professional competency and due care, 2) professional ethics, 3) professional responsibility, 4) professional liability, and 5) professional organization.

1. Professional competency and due care means the mastery of professional expertise knowledge including the ability to apply the knowledge into practice to develop professional skills and experience. This principle includes the duty to maintain professional knowledge and skills at the level required to ensure that a client or employer receives competent professional service based on current developments in practice, legislation and techniques.

2. Professional ethics means the commitment to conform to the rules or standards of a professional knowledge, practices, and to uphold professional code of conducts.

3. Professional responsibility means the commitment to respond to their actions, non-actions towards their clients/patients, the public, the discipline, and the professional organization, including the consequences their actions and non-actions have on their clients/patients, the public, the discipline, and the professional organization.

4. Professional liability means obligation to compensate a client for clients’ physical/mental/ psychological losses/pain/suffering due to a negligent act. The term negligence act has two meanings: (1) Failure to perform duties of the particular profession. (2) Failure to meet reasonable standards of behavior, conduct, or professional practice. This standard refers to the commitment to follow best practices in accordance with professional standard operation procedure (SOP). There are three types of defects leading to product liability: design defects, manufacturing defects, and defects in transportation and marketing.

5. Professional organization (society, association). Professionals are usually members of a respective professional organization. Such organizations are usually non-profit and exist to promote a particular profession, protect the interests of the public and its members, maintain and enforce standard of training and practices, issue, extend, terminate, and suspend professional license, monitor professional disciplines (ethics) of its members.
Principles of Professional Ethics

Principle of Human Dignity

This principle is considered the basis of all ethical principles which deal with human beings. This principle is based on theistic religions such as Catholicism, Christianity, Islam and Hinduism. According to Catholic and Christian belief, human dignity is rooted in the concept of man being created in God’s Image (Imago Dei).

"Human life is sacred because from its beginning it involves the creative action of God and it remains forever in a special relationship with the Creator, Who is its sole end. God alone is the Lord of life from its beginning until its end: no one can under any circumstance claim for himself the right directly to destroy an innocent human being" (Donum Vitae, 5).

In addition, this principle is the foundation of the first article of the Universal Declaration of Human Rights. “All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood.” (Universal Declaration of Human Rights, Article 1) According to this principle, human life is sacred and holy since God, the Creator, is sacred and holy. Therefore, every human being has equal intrinsic worth (value) regardless of race, gender, physical-mental condition, and socio-economic status since all of them are the creature of the same God.

Principle of the Respect for Human Person

The idea of the human dignity and the intrinsic worth of human beings leads to a normative principle of the respect for the human person. It means all human life and rights must be respected and protected. Human dignity transcends any social order and cannot be legitimately violated by society in any case. All societies have a duty to care, uphold, respect, protect, and promote life. Yet human rights and freedoms are not absolute. One’s rights are always constrained by the right of others, duties towards others and society, and responsibilities for one’s actions, non-actions, others, and community. Rights embrace correlative duties and responsibilities.

Principle of Integrity and Totality

The word totality in this context refers to the totality of a person or a whole person. The integrity in this context refers to the idea that the whole person is the integration of the physical body, mind, will, intellect, emotion, and fraternity. In any interaction, a professional has a duty to "preserve a view of the whole human person in which the values of the intellect, will, conscience, and fraternity are pre-eminent" (Gaudium et Spes, n. 61) and to preserve the balance and the interdependent of the integrated bodily and spiritual nature of human life, whereby every part of the human body "exists for the sake of the whole as the imperfect for the sake of the perfect" (St. Thomas Aquinas, Summa Theologica II, Question 65, Article 1). This principle requires a professional to take the well-being of the whole person into account in deciding about the dealing with a person, the use of any therapeutic intervention or technology (see Ethical and Religious Directives, nn. 29 and 33). Any dealing, interaction, or intervention that causes harm or
undesirable side effects can be justified only by a proportionate benefit to the person, client, or patient. Accordingly, a part of the human body may be sacrificed if that sacrifice means continued survival for the person. While such sacrifices are normally justifiable under the principles of integrity and totality, they may sometimes be foregone under the principle of disproportionate means. For example, a part of the human body may be sacrificed if that sacrifice means continued survival for the person.

**Non-Harm Principle**

The **Principle of Non-maleficence**, *Primum non nocere*, is commonly translated as "first, do no harm" and "doing no evil," is often considered to be a corollary to the principle of beneficence. In this respect, it shares the same characteristics of beneficence considered as a middle principle. Non-maleficence is sometimes interpreted radically to imply that if one cannot do good without also causing harm, then one should not act at all (in that particular circumstance). But this interpretation makes actions almost impossible in a world where even the best actions may cause some harmful results. The attempt to avoid all kinds of harms would require no action, including actions that may be both morally good and necessary for achieving the good. The best possible solution is to regard this principle a middle principle. There are two ways to understand this principle in this manner. 1) The principle should be parallel to related principles which will be explicated in the following parts—the principle of beneficence and the principle of double effect. 2) Non-malevolence can also refer to not intending or willing harm. In the situation where harm cannot be avoided and if avoided the good cannot be achieved, the professional has to bear in mind that he/she has no intention to do any harm or any evil to the person. The interactions, interventions, or treatment is solely intended for the goodness of the well-being of a person.

**Principle of Beneficence**

The principle of beneficence is traditionally understood as the "first principle" of morality, the dictum "do good and avoid evil". This principle implies the moral duty of the professional to 1) protect a client from harm, 2) balance risks and benefits, 3) maximize possible benefits and minimize possible harms to this principle. The principle of beneficence is also a "middle principle" insofar as it is partially dependent for its content on how one defines the concepts of the good and goodness. As a middle principle, beneficence is not a specific moral rule and cannot by itself tell us what concrete actions constitute doing good and avoiding evil. Some of the specific norms that arise from the principle of beneficence in the Catholic tradition are: 1) never deliberately kill innocent human life (which, in the medical context, must be distinguished from foregoing disproportionate means); 2) never deliberately (directly intend) harm; 3) seek the patient’s good; 4) act out of charity and justice; 5) respect the patient’s religious beliefs and value system in accord with the principle of religious freedom; 6) always seek the higher good, that is, never neglect one good except to pursue a proportionately greater or more important good; 7) never knowingly commit or approve an objectively evil action; 8) do not treat others paternalistically but help them to pursue their goals; 9) use wisdom and prudence in all things, that is, appreciate the complexity of life and make sound judgments for the good of oneself, others, and the common good.
Principle of Double Effect

An action of double effect is an action that is good in itself but which has two effects—an intended and reasonably attainable good effect, and an unintended yet foreseeable evil effect. This kind of action leads to a clash between the two previous principles: "Beneficence” and “Non-beneficence”. The question arises as to whether the obligation to avoid evil requires the professional to abstain from a good action in order to prevent a foreseen but merely permitted concomitant evil effect. The answer is that they do not always need to abstain from a good action that has foreseen bad effects. The decision-making depends on certain moral criteria identified in the principle of double effect. The followings are guidelines for decision making. (Ashley, 1997, pp. 191-195; Cataldo, 1995, pp. 1-11; Marquis, 1991, pp. 515-544)

1. The object of the act must not be intrinsically contradictory to one's fundamental commitment/belief about the Good, the Absolute Truth, religious or ethical principles/precepts. It must be a good action judged by the commitments aforementioned.
2. The direct intention of the agent must be to achieve the beneficial effects and to avoid the foreseeable harmful effects as far as possible, that is, one must have no intention to cause any harm or evil. The harmful or evil consequences are a natural effect that cannot be avoided, and it is never intended.
3. The foreseen beneficial effects must not be achieved by the means of the foreseen harmful effects, and no other means of achieving those effects are available;
4. The foreseen beneficial effects must be equal to or greater than the foreseen harmful effects (the proportionate judgment);
5. The beneficial effects must follow from the action at least as immediately as do the harmful effects.

Principle of the Respect for Autonomy

Autonomy means the capacity for self-determination. The principle implies that each person should be given the respect, time, and opportunity necessary to make his or her own decisions so as to maintain what he/ she believes will be most beneficial. The positive aspect of this principle is that the professional must regard the clients/patients they deal with as a human person who has rights and freedom to choose without force, fraud, deceit, duress, over-reaching or other forms of constraint of coercion. In addition, they have a right to participate in decisions that directly affect them, in accord with their dignity and with their responsibility to the common good. However, such recognition is not sufficient. The professional has a moral duty to respect each of them as an autonomous agent. To respect an autonomous agent is to acknowledge that person’s right to make choices and take action based on that person’s own values and belief system. On this account, respect involves not only refraining from interfering with others’ choices, but sometimes entails providing them with the necessary conditions and opportunities for exercising autonomy. However, there is a limitation. Catholic health care institutions should never be required to assist with suicide, euthanasia, or any action that opposes its professional integrity, values, principles, or institutional conscience. The principle of respect for autonomy implies the duty of the professional to protect confidentiality, respect privacy, and tell necessary truth needed for right decision making or informed consent. The principle of autonomy requires that protection be given to potentially vulnerable populations such as children, the elderly, the mentally ill, or prisoners. Individuals in these
groups may be incapable of understanding information that would enable them to make an informed decision about study participation. They are considered potentially "vulnerable." Consequently, careful consideration of their situation and needs is required and extra care must be taken to protect them. For example, this principle cannot be applied to the diminished capacity of an elderly individual or an immature kid. They need a guardian to make the decision on their behalf to protect their best interest.

**Principle of Informed Consent**

The idea of the principle of informed consent is that a competent person has the right and responsibility to advance his or her own welfare by freely and voluntarily consenting or refusing the treatment/intervention provided by the professionals. However, there is a gap of knowledge between the professional and the clients/patients. The ability to make the right decision of the informed needs the dissemination of sufficient and correct information from the professional. Informed consent requires clear communication, not complex technical explanations or legal jargon beyond the subject’s ability to comprehend. Informed consent is not valid unless the consenter comprehends the information upon which consent is based. Miscommunication can be minimized by having pilot subjects read the consent statement and explain it in their own words. It should be revised until it is correctly understood. Therefore, the ability to make decision of the informed consent depends on: 1) adequate disclosure of information; 2) patient freedom of choice; 3) patient comprehension of information; and 4) patient capacity for decision-making. By meeting these four requirements, three necessary conditions are satisfied: 1) that the individual’s decision is voluntary; 2) that this decision is made with an appropriate understanding of the circumstances; and 3) that the patient’s choice is deliberate insofar as the patient has carefully considered all of the expected benefits, burdens, risks and reasonable alternatives. Adequate disclosure includes information concerning the following: 1) diagnosis; 2) nature and purpose of treatment; 3) risks of treatment; and 4) treatment alternatives. The consent may take on two other forms: 1) in cases where individuals are brought to the hospital in an unconscious state or with no decision-making capacity consent can be presumed, on the condition that the procedures performed are necessary and cannot be postponed until the person has regained consciousness or decision-making capacity; 2) It also may happen that a surgeon sees the critical need of more extensive surgery in the course of an operation. In these circumstances, there may be no time to contact the spouse, parents or surrogate of the unconscious patient. The right and duty of decision making is to be exercised on his or her behalf by a surrogate. This is known as vicarious consent. (Ethical and Religious Directives, pp. 26, 27 and 28)

**Principle of Parentalism**

According to the principle of parentalism, a legitimate guardian could restrict or suspend the right and freedom to choose of the immature, the vulnerable, or the incapable even against his/her consent just for the reason of: 1) preventing the individual from self-harm, 2) securing for that individual the good which he/she might not otherwise achieve. For example, the requirement of an immature to attend school against his/ her will is justified for the reason that if the immature have to choose, they will choose not to go to school. This choice will eventually rid them of the opportunity of good education and of a good life in the future. However, when they become mature the freedom and right to make decision has to be returned to them. The second reason is applicable when
incompetent or incapacitated individuals are in a situation concerning the protection of their lives or of their best interests. Then the decision making and the consent can be made by the surrogate on the basis of the principle of stewardship. However, when they return to consciousness and become capable freedom and right to make decision has to be returned to them.

**Principle of Stewardship**

Principle of stewardship refers to an obligation to protect and treat human life and life-resources (natural environment) with profound respect for their intrinsic value. This obligation is based on the belief that the two greatest gifts that the Absolute has given to human beings are: our own life, human nature, with its biological, psychological, social and spiritual capacities; and the earth, with all its natural resources and eco-system. According to Christian belief human life is sacred, has intrinsic value, and deserves protection and respect because human beings are made in God’s image and likeness (Imago Dei). In Genesis… of the Christian bible God has nominated man the master of plants and animals. The idea of a master in an ancient belief has two implications—the privilege to make use of it and the duty to care and protect. The principle requires that the gifts of human life and its natural environment be used wisely with profound respect for their intrinsic ends. The gift of human creativity especially should be used to cultivate nature and the environment, recognizing the limitations of our actual knowledge and the risks of destroying these gifts.

**Fidelity Principle**

This principle is based on the belief that the professional cannot function properly without good faith from the recipient and the public as a whole. A patient approaches a medical professional trusting that he will use the best of his knowledge and professional skill to cure his disease. An educational institute is sustained by public trust in the quality of the institute, administrator, teachers, and professors. The root of the individual’s and public’s trust is based on the belief that the professional will put clients’ or patients’ welfare ahead of all other considerations, even the monetary gain. It is the function of the professional to safeguard and promote this trust in the society at large by performing his duties with loyalty, faithfulness, and commitment. A loss of confidence in the professionals could therefore undermine their important roles in society.

**Truth Telling Principle**

This principle implies an obligation to communicate honestly with clients/patients, give them correct and complete information and help them understand what is being explained. This principle implies the moral duty of the professional not to tell a lie which includes avoid telling partial truth and avoid obscuring the truth. This principle is related to the principle of informed consent and the principle of fidelity. The clients/patients need correct and complete information without which they cannot make the right decision. Telling a lie or giving wrong or incomplete information would lead to a wrong decision and eventually cause loss and harm to the patients/clients. In addition, when they have discovered the fact afterwards that they have been lied to, they will lose trust and confidence in the professional.
Principle of Avoiding Conflict of Interest

According to this principle the professional must avoid an involvement in situations in which their loyalties are divided; their professional judgment can be biased; their personal interest may conflict with the duty or responsibility and confidence (of care and due diligence) vested on them; they may be tempted to act in violation of their duty of loyalty to the clients, or to the organization, or to their Ethical and Professional Standards. Engage in activities that create actual, apparent, or potential conflicts of interest would lead to the loss of trust and confidence in the integrity of the professional.

Principle of Confidentiality

The principle of confidentiality can be generally defined as ‘when personal information is given or received in confidence for a particular purpose, it may only be used for that purpose and may only be passed on to anyone else with the consent of the information provider.’ This principle is based on the fact that the professionals will only be able to practice their professional duty properly when their clients/patients cooperate and provide them with private and confidential information. These clients and patients disclose this kind of information to the professional with a belief that the confidential information will be kept confidential and is to be used only for professional practice for the benefit of the client and not for the personal advantage of the professional person or third parties. Due to such expectation the professional person should: 1) secure confidentiality of information acquired; 2) not disclose any such information to third parties without proper and specific authority unless there is a legal or professional right or duty to disclose; 3) should not use the information for the personal advantage of the professional person or third parties. A violation can be detrimental to the client or to another individual.

Principle of Fairness and Justice

The principle of fairness and justice refers to the obligation by which the government, institutions, and administrators must respect a person’s right to natural justice, equal and fair treatment, and procedural justice. This obligation includes:

1. Respect the uniqueness and intrinsic worth of every individual.
2. Treat people with dignity, respect and compassion to foster a trusting work environment free of harassment, intimidation, and unlawful discrimination.
3. Ensure that everyone has the opportunity to access professional services.
4. Assure an environment of inclusiveness and a commitment to diversity in the organizations.
5. Develop, administer and advocate policies and procedures that foster fair, consistent and equitable treatment for all.
6. Regardless of personal interests, support decisions made by our organizations that are both ethical and legal.
7. Adhere to the principle of procedural and retributive justice in case of wrong doing.
8. Act in a responsible manner and maintain standard professional practice.
Principle of Distributive Justice

The principle of distributive justice implies that the administrative professional has a duty to allocate resources, professional services, services, benefits and burdens to clients/patients and community members fairly. It also implies that everyone is entitled to equal access to basic care necessary for living in a human way. This principle is closely linked to the concepts of human dignity, the common good, and human rights. Fair distribution needs to take the following factor into account: 1) the individual’s needs, contribution and responsibility; 2) the resources available to the society or organization (market considerations would be included under this, as well as other financial considerations); and 3) the society’s or organization’s responsibility to the common good. In the context of health care, distributive justice requires that everyone receive equitable access to the basic health care necessary for living a fully human life insofar as there is a basic human right to health care.

Principle of the Common Good

In general, the common good consists of social conditions and the social goods/benefits/services secured by those conditions, which allow individuals to achieve human and spiritual flourishing. According to this principle, human community, including its government, must be actively concerned in promoting the health and welfare of every one of its members so that each member can contribute to the common good of all. The effective and efficient contribution of the community members to the common good aforementioned needs four essential elements: 1) respect for persons; 2) social welfare; 3) peace and security; and 4) active participation from community members (subsidiary). (see Ethical and Religious Directives, Part One, Introduction). In so far as the common good presupposes respect for persons, it obligates public authorities to respect the fundamental human rights of each person. Society should allow each of its members to fulfill his or her vocation. Insofar as it presupposes social welfare, the common good requires that the infrastructure of society is conducive to the social well-being and development of its individual members. In this respect, it is the proper function of public authorities to both arbitrate between competing interests and to ensure that individual members of society have access to the basic goods that are necessary for living a truly human life, e.g., food, clothing, health care, meaningful work, education, etc. Finally, this conception of the common good requires the peace and security that accompanies a just social order. Public authority, then, should be used to ensure, by morally acceptable means, the security of society and its individual members (Gaudium et Spes, n. 26; Origins 23, 1993, pp. 81-86).

Principle of Subsidiarity

The principle of subsidiary is a corollary of the principle of the common good, subsidiarity requires those in positions of authority/professional administrators to recognize that individuals have a right to participate in decisions that directly affect them, in accord with their dignity and with their responsibility to the common good. Decisions should be made at the most appropriate level in a society or organization, that is, one should not withdraw those decisions or choices that rightly belong to individuals or smaller groups and assign them to a higher authority. However, a higher authority properly intervenes in decisions when necessary to secure or protect the needs and rights of all. The principle implies that, when a decision is to be made, professional administrators should identify the most
appropriate forum and level of decision making, and how best and to what degree those individuals most affected should participate in the decision making process.

**Principle of Toleration**

Toleration in this context refers to tolerance of moral and/ or religious views, culture, races, and world views other than one’s own. According to this principle, professional administrators either public or private organization tolerate the evil actions of others (including some intrinsic evils) for the purpose of maintaining greater common good of society, if these two criteria are met: 1) if a greater good or set of goods would be lost if the evil action were not tolerated; or, 2) if greater evils would occur were the original evil not tolerated. The Principle of Toleration, however, should not be considered a "loop hole" to the prohibition against formal and immediate material cooperation. In other words, the principle of toleration cannot justify an illicit participation in an intrinsically evil action, but only the toleration of others participating in evil actions where the eradication of this participation is not practically or morally feasible.

**Principles of Formal and Material Cooperation**

This principle is based on the fact that under many circumstances, it would be impossible for an individual to do good in the world, without being involved to some extent in evil. This principle is the guideline to help individuals discern how to properly avoid, limit, or distance themselves from evil (especially intrinsic evil) in order to avoid a worse evil or to achieve an important good. According to this principle, there are three types of cooperation:

1. **Formal Cooperation.** Formal cooperation occurs when a person or organization freely participates in the action(s) of a principal agent, or shares in the agent’s intention, either for its own sake or as a means to some other goal. Any formal cooperation in intrinsically evil actions, either explicitly or implicitly, is morally wrong.

2. **Immediate Material Cooperation.** Immediate material cooperation occurs when the cooperator participates in circumstances that are essential to the commission of an act, such that the act could not occur without this participation. Immediate material cooperation in intrinsically evil actions is morally wrong.

3. **Mediate Material Cooperation.** Mediate material cooperation occurs when the cooperator participates in circumstances that are not essential to the commission of an action, such that the action could occur even without this cooperation. Mediate material cooperation in an immoral act might be justifiable under three basic conditions: a) If there is a proportionately serious reason for the cooperation (i.e., for the sake of protecting an important good or for avoiding a worse harm); the graver the evil the more serious a reason required for the cooperation; b) The importance of the reason for cooperation must be proportionate to the causal proximity of the cooperator’s action to the action of the principal agent (the distinction between proximate and remote); 3) The danger of scandal (i.e., leading others into doing evil, leading others into error, or spreading confusion) must be avoided.
Questions for Further Reflection:

1. Analyze case study Assigned
Do you agree with the decision making of the professional in each of the case studies? If you agree, why; if you disagree, why not? Identify the victims, their losses, the professional and the principles of professional ethics concerned.

Case Study I
In January 1998 two thousand workers in a manufacturing company went on strike and blocked the main road because of wage deduction and no bonus. This strike caused traffic jams and inconvenience to pedestrians, so the police cracked down the demonstration and arrested some of them.

Case Study II
Yellow is the only daughter-in-law of a rich family. She is pregnant for 3 months. Her parents-in-law are waiting for their first grandchild. The doctor finds a cancer in her womb, and she needs an operation. Since it is urgent to save her life, the doctor decides to remove her uterus without her consent.

Case Study III
Brown, a managing director of a company, claims that he is a man of integrity. He tells his employees that honesty is his top priority. He keeps his words by providing them with fringe benefits to commensurate their dedication. He overhears a rumor that Orange, his senior accountant, always cheats. He fires her immediately.

Case Study IV
An engineering team of a TV station was raising the station's new television transmission antenna tower. Unfortunately, something went wrong with the lifting rig, and the tower fell down to the ground killing 5 onlookers. Ten cars parking nearby were completely destroyed.

Case Study V
A high-school teacher caught a student taking drugs. The teacher reported the case to the school director who called for a meeting. He informed them about the case. Another teacher discussed this case in her class where the boy’s sister was present. Other students told their parents about this incident.

Case Study V
John Q. Junior, the only son of Mr. John Q. has been admitted to a hospital due to heart failure. The medical experts recommend heart transplantation. However, the hospital administration does not include his son on the list of recipients since he cannot afford to pay the expensive medical bill. Mr. John Q. tells the surgeon that he will kill himself and donate his heart to his son.

2. What is the concept of professional? Identify components of professionalism.

3. Indicate Professional and non-professional disciplines at AU. What makes the differences?
References:


Documents of Vatican II, *Gaudium et Spes*, n. 26; USCC, NCC

*The Ethical and Religious Directives for Catholic Health Care Services* (ERDs). Available at www.usccb.org

