

Developing  
Your Moral  
Compass

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# ETHICAL CHALLENGES in HEALTH CARE

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Vicki Lachman



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## Developing Your Moral Compass

**Vicki D. Lachman, PhD, MBE, APRN**

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Springer Publishing Company, LLC  
11 West 42nd Street  
New York, NY 10036  
www.springerpub.com

*Acquisitions Editor: Allan Graubard*  
*Production Editor: Barbara A. Chernow*  
*Cover design: David Levy*  
*Composition: Agnew's, Inc.*

Ebook ISBN: 978-0-8261-1090-9

09 10 11 12 / 5 4 3 2 1

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**Library of Congress Cataloging-in-Publication Data**

Lachman, Vicki D.

Ethical challenges in health care : developing your moral compass /

Vicki D. Lachman.

p. ; cm.

Includes bibliographical references and index.

ISBN 978-0-8261-1089-3 (alk. paper)

1. Medical ethics. 2. Corporate culture. I. Title.

[DNLM: 1. Ethics, Medical. 2. Delivery of Health Care—ethics. 3. Morals.

4. Organizational Culture. 5. Patients. 6. Safety. W 50 L138e 2009]

R724.L23 2009

174.2—dc22

2009015443

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Printed in the United States of America by Victor Graphics

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# Preface

Courage is something we all respect. When asked to describe courage, however, many of us will conjure up an image of a soldier in battle or a firefighter running into a burning building, or possibly even of a fictional hero, of Superman or Spiderman, saving the day. Certainly, such images of courage are prevalent in our media, including the local hero who dives into a rushing river to save a child from drowning. Yet all these images exemplify individuals who demonstrate *physical* courage.

This book, however, will focus on *moral* courage. In our society, we use the phrase “courage of my convictions” to describe moral courage—the courage demonstrated when individuals “take action,” especially when others looked away or chose to do nothing. This is the courage we note when an individual holds onto his or her values when faced with disapproval, humiliation, loss (for example, of job), or isolation from peers.

I commend to your reading Rushmore Kidder’s (2005) book, *Moral Courage*, which speaks articulately for the courage to be ethical and do right. This book is designed to speak to the mind, heart, and soul of healthcare professionals and leaders. The focus of the examples, cases, and successes described by Kidder come primarily from the trials and tribulations endured in the healthcare environment.

Here, in this book now in your hands, my goal is clear: to help individuals and organizations not only triumph over the fear that stops many from exercising moral courage, but to also feel the personal and professional gratification it offers. Developing moral courage may be difficult. Fortunately, we have many role models, and I will use their examples and quotations throughout the book. One such archetype, the great South African civil rights leader Nelson Mandela, said, “I learned that courage was not the absence of fear, but the triumph over it. The brave man is not he who does not feel afraid, but he who conquers that fear.”

For healthcare providers and leaders to demonstrate the needed action at difficult times, they need to understand their obligations, be skillful in assertiveness and negotiation, and manage this fear that Mandela refers to. “Standing up for what you believe in, even if it means standing alone” requires having the strength to do the right thing when faced with moral decisions involving patient safety, patient confidentiality, and the patient’s autonomous right to know the truth about his or her diagnosis, prognosis, and risk of recommended treatment.

In the hope of instilling or increasing the healthcare professional’s moral courage, this book will provide knowledge, strategy, and encouragement. Each of its five sections features case examples from actual healthcare providers and leaders to illustrate skills or opportunities. Tables and figures will provide readers with succinct points to remember as they develop their moral compass.

Multiple helpful ideas from the book *Crucial Conversations* (2002) by Kerry Patterson, Joseph Grenny, Ron McMillan, and Steven R. Covey will be sprinkled throughout the pages to come.

The first section of the book focuses on the personal development of moral courage and on existing opportunities for professionals in health care to demonstrate moral courage. After a brief review of the origin of the concept of moral courage, Section I spotlights the knowledge and skills necessary for “standing up and speaking out.” For example, the reader will learn the values they are expected to honor as healthcare professionals—values that are nonnegotiable obligations in the professionals’ Code of Ethics that society expects us to respect. Perspectives on how to manage the risk and our fear of speaking up, as well as helpful information on how to deliver bad news to patients, coworkers, and leaders, are also included here.

Sections III and IV focus on leaders and leadership in healthcare organizations. Section III examines the four arenas in which leaders need to center their attention if they want to build an organizational culture that supports moral courage. The significance of ethical culture, executive leadership “walking the walk,” accountability, and human resource policies that permanently hardwire the organization for integrity and excellence are discussed. Section IV opens with chapters on the supports required for moral courage, such as organizational and clinical ethics committees and a culture of patient safety. Chapter 18 specifically discusses the problem of disruptive physicians in preventing a civil culture where all voices can be heard to prevent and resolve patient safety and quality concerns. In Chapter 19 on leadership development, strategies are taken from successful organizations, such as Baptist Health Care and Disney and the companies in Jim Collins’s *Good to Great* (2001). These organizations can provide leaders with guidance to finely tune their moral compasses. This chapter also frames the duty of a healthcare organization to develop future ethical leaders who can be exemplars in moral courage for the staff.

Section V ends the book with the one unresolved national healthcare issue that impacts all healthcare providers and leaders on a daily basis—46 million uninsured people. This tragedy will require the moral courage of our politicians and the intellect of many in economics, health care, and business to resolve. My hope is that as the code of silence ends, apathy will lift and healthcare professionals and leaders will demonstrate the moral courage necessary to tackle this heartbreaking problem.

Vicki D. Lachman, PhD, MBE, APRN

# Ethical Challenges in Health Care

Personal  
Development  
of Moral  
Courage



# Virtue of Moral Courage: Socrates to Barack Obama

1

The world is a dangerous place, not because of those who do evil, but because of those who look on and do nothing.

—Albert Einstein, a great scientist and humanitarian

It is only fitting that our discussion of ethical challenges in health care begins with the founding fathers of philosophy—Socrates, Plato, and Aristotle. They agree more than they disagree on the subject, but their differences are helpful to our understanding of the importance of moral courage. Their influence has continued through the centuries, as can be seen in the lives of two healthcare professionals born in the nineteenth century—Florence Nightingale and Albert Schweitzer, both of whom epitomize the virtue of moral courage.

Although this book highlights the contributions of many people who have exhibited an exemplary commitment to the health and well-being of others, this chapter concludes with stories of moral courage outside the healthcare environment, beginning with holocaust rescuers. These individuals are included because they exemplify the everyday person's willingness to do his or her part to right a wrong, and I hope they will serve as an inspiration to healthcare professionals,

who also need to right the wrongs—the wrongs inflicted on patients who are vulnerable, such as those dying in ICUs, those at risk for patient errors, and those who are uninsured. Finally, the chapter highlights the philosophy of Barack Obama, who was recently elected president of the United States. May you have his audacity to hope for a safer and more just healthcare system, a system that honors your voice as you speak out for the patients you serve.

## Trio of Famous Philosophers: Socrates, Plato, and Aristotle

The emergence of philosophy and science in Athens began with Socrates, who was born in 470 BC. His approach to drawing out the truth became known as the Socratic method. By asking his students and listeners a series of penetrating questions, he tried to help them achieve greater clarity of thought. But, his method sometimes revealed that respondent's ideas were not particularly logical. As a result, he was not a favorite of many politicians. In 399 BC, a jury of 500 fellow citizens charged Socrates with immorality. He was sentenced to death by a margin of six votes but was offered the chance to save his life by paying a small fine for his impiety. He cast off the option. He also rejected the pleas of Plato and other students, who had a boat waiting for him at Piraeus, to flee to freedom. Socrates simply refused to break the law. He asked, "What kind of citizen would I be if I refused to accept the judgment of the jury? No citizen at all." He spent his last days with his friends before he drank the fatal dose of hemlock. We shall return to the question of whether his decision and action reflect moral courage.

Socrates lectured mostly to the sons of well-to-do aristocrats, one of whom was Plato, born in 428 BC. He was 28 years old when Socrates was put to death. At the age of forty, Plato established a school, the Academy, for the education of Athenian youth. His students were most likely aristocrats, and they discussed all subjects, including politics, economics, science, philosophy, mathematics, and morality. Plato's ideas are set out in the *Republic* in the form of a dialog that discusses the physical, mental, and spiritual development of the individual that is necessary to produce a perfect society (Aristotle, trans. 2004). Plato argued that reality is known only through the mind because our senses may deceive us. He therefore believed in a higher world, a world of Ideas or Forms that define what is unchanging, absolute, and universal. In today's world, many people see few absolutes, as moral relativism permeates our culture. Moral relativists maintain that moral disagreements arise because what is right for one is not necessarily right for another. However, as you shall see, some absolutes are outlined in our codes of ethics.

The third member of this trio, Aristotle, was born in 384 BC. At the age of 18, Aristotle came to Athens to study at Plato's Academy, and he stayed until Plato's death in 348 BC. He agreed with Plato that the highest human faculty was reason and that its supreme activity was contemplation. In addition to studying metaphysics and mathematics, Aristotle thought it was also very important to study the world around him—from physics and mechanics to biology. Perhaps being raised in the house of a physician had given him an interest in living things. What he achieved in those years in Athens was the beginning of a school of organized scientific inquiry on a scale exceeding anything that had preceded him.

Plato and Aristotle agreed that the world is the product of rational design and that the only true knowledge is that which is irrefutable. The essential difference between them is well known: Plato considered *mathematical reasoning* as the means to reveal truth, while Aristotle believed that *detailed empirical investigations* of nature were essential if humans were to understand their world. And there, in the space of just a few decades, we have the essence of the two philosophical traditions that have dominated the Western intellectual tradition for the past 2500 years: Rationalism—knowledge is *a priori* (comes before experience)—and Empiricism—knowledge is *a posteriori* (comes after experience).

What, then, were the differences between Plato and Aristotle? Plato suggested that people were born with knowledge, and Aristotle argued that knowledge comes from experience. Aristotle had little patience with Plato's higher world of Forms. Aristotle argued that there were universal principles, but that they are derived from experience.

## Views on the Virtue of Courage

After reading contemporary analyses of these founding fathers of our intellectual tradition, they clearly should be included in our analysis of the virtue of moral courage. Literally, a virtue is a desirable quality, a quality we would expect to find in a person of merit. Virtue theory focuses on the character of the person rather than on the person's decision-making process. Virtue theory holds that a person of good moral fiber will make the right decision, regardless of the process.

All three philosophers argued that education is the key in shaping an individual's character. Plato, however, emphasized the importance of story telling, particularly when the main character demonstrates a desired virtue. Aristotle, however, further believed that character is also the result of habit. If the individual repeatedly strives for excellence, this habit will yield an excellence of character.

Of course, the initial writings of the trio focused on courage on the battlefield. This should not surprise us, as they lived during the dismantling of the Athenian Empire as a result of the Peloponnesian War, with its many legendary battles. In his *Nicomachean Ethics*, for example, Aristotle's discussion of courage centers on dying on the battlefield, which was considered noble, unlike dying from disease.

The distinction between physical and moral courage, however, is not as straightforward as it might seem. In our own history, we can distinguish between soldiers who have physical courage, as required by their commanders in war, and those who, like Martin Luther King, Jr., have both moral and physical courage. King displayed both as he died fighting for the moral principles in which he believed. His war was not a military battle. Rather it focused on winning the battle against the enemy of racism (King, 1963).

Dr. King knew that he was always in danger of assassination, as do many who seek to change the injustices of their times. Socrates knew it. Galileo knew it. Joan of Arc knew it. In *Laches*, Socrates and his discussion partners determined that physical acts without the knowledge of good and bad (morality) can never be courageous (Plato, trans. 2004, pp. 195c–197b). If the individual speak-

ing out does not understand that he is speaking against an established wrong, the person can not receive credit for moral courage.

Courage is one of the four cardinal virtues in the lasting tradition of moral character described by Plato. The other qualities are temperance, justice, and wisdom. These four virtues have been accorded a pivotal status in moral life from ancient times to the present day.

Will is introduced as an executive function between the impulses (appetites) and rational aspects of human experience. Will is the result of education in the physical, mental, and spiritual realms. Socrates and Plato both believed that management of mind over body was the *only* way that human actions could become virtuous. Temperance contained the appetites with good judgment (wisdom) by focusing on justice (fairness for all, as opposed to self-centeredness). Courage manifests as the ability to manage the hardships that conflicts bring, along with an ability to endure adversity or suffering.

Aristotle's further refined his view of courage by focusing not on cardinal virtues, but on virtue of thought and virtue of character. Virtue of thought is increased through education, and virtue of character is advanced through habit. But, you might ask, could not habit also lead to the development of a vice?

Aristotle believed that courage was the balance (mean) between the extremes of cowardice and rashness. Therefore, a person might rush headfirst into danger either because he is blinded by rage (as a terrorist might be) or because he is oblivious (if intoxicated) to the hazards that lie ahead. According to Aristotle, courage is defined as having rational control of emotion and passion—the person is expected to have control over fear and other emotional states. He supposed that both deficiency and excess of a virtue could be catastrophic. Aristotle writes in *Nicomachean Ethics*, “he is courageous who endures and fears the right things, for the right motive, in the right manner, and at the right time and who displays confidence in a similar way” (Aristotle, trans. 2004, Book III7, pp. 1115b15–20). Aristotle was resolute in his belief that a virtue, like courage, could only be used for honorable ends. From a slightly different perspective, Plato would say that courage for wicked ends was a lack of the cardinal virtue of wisdom.

Aristotle believed that virtuous individuals are so desirous of doing good that they struggle to make moral decisions (Roberts, 1984). Therefore, such persons do not require will power or courage to motivate them to do what is right. However, most of us face moral struggles, and Roberts (1984) helps us differentiate between an assessment based on “purity of heart” and an assessment based on being a “hero.” According to Roberts, an internal struggle bolstered by will power enables an individual to choose the virtuous action. The eighteenth-century German philosopher Immanuel Kant (1788/1996) sees the choice of virtuous action as a result of moral reasoning. However, Kant's focus is on duty or obligation, whereas virtue focuses on character. Aristotle's focus was the importance of acting, not just reasoning. He said that “one must not only know what to do, but he must also be able to act accordingly” (Aristotle, trans. 1954, Book VII, pp. 1152a5–10).

Through the centuries, many people have shown moral courage in different fields and different situations. Here are a few examples of people with the moral courage to live by and fight for their values.

## Florence Nightingale: More Than a Lady With a Lamp

Born in 1820, Florence Nightingale was an English hospital reformer credited with fighting for improved sanitary practices in hospitals, public health facilities, and formal training for nurses. Unlike medicine, nursing did not evolve from a craft guild tradition. As a result, there was little formal training.

Florence Nightingale was acquainted with the lives of the ancient Greeks and read and translated the works of Plato. Her notion of God suggests the Platonic ideal of good character as founded on objective knowledge. A person of good character is one who knows clearly and completely what is good and invariably chooses according to that knowledge. Nightingale also equates doing what is right with happiness (Calabria & Macrae, 1994). These ideas are in accord with Plato's, as argued in the *Republic*, that virtue is knowledge and is the grounding of human flourishing and happiness.

Nightingale's conception of nursing is also similar to Plato's conception of public service, appropriate for what he called guardians. Plato believed that the purpose of education for guardians was to form moral character and not to teach technical expertise (Le Vasseur, 1998). Platonic education aimed to turn talented people into leading citizens, who would care for the good of the community. Nightingale's use of her talents, education, and connections to crusade for health-care reform points to a broad political function concerned with a societal good.

Nightingale's goal of a healthy world is only possible through leadership and global action. In *Florence Nightingale Today: Healing, Leadership, Global Action* (Dossey, Selanders, Beck, & Attewell, 2004), the authors use interpretive biographical methodology and synthesize essential patterns from Nightingale's writings to link her teachings to contemporary nursing theory. Nightingale's many undertakings to better public health resulted in decreasing the death rate during the Crimean War, collecting groundbreaking evaluative statistics, establishing the first secular nursing school, and improving sanitation in Great Britain. The authors also describe her as a mystic, theorist, researcher, teacher, author, leader, activist, and visionary. They advise that if nurses would use Nightingale for inspiration, each could make a difference in the state of health on the microscopic and macroscopic levels.

Letters depicting Florence Nightingale as an ambitious meddler who went over doctors' heads show a spirit that nurse leaders in the profession consider necessary, a strength I find is still needed. Her efforts clearly reflect her evidence-based framework, ranging from Nightingale's first work after her return as a heroine from the Crimean War in 1856 to a later attempt to influence social policy with a proposal for a chair in "social physics" at Oxford University in 1891. Nightingale also fought for a woman's right to do purposeful work outside the home.

Other health professionals, such as Elizabeth Blackwell, the first female physician, were also staunch advocates of nursing education. Another outspoken English nurse reformer, Ethel Bedford Fenwick, championed nursing registration and founded the *British Journal of Nursing* in 1893. Her American colleague, Lavinia Lloyd Dock, author of *Materia Medica for Nurses*, wrote one of nursing education's first textbooks. Both were prominent advocates of women's suffrage. All of these women, like Nightingale, demonstrated moral courage as advocates for better patient care over the objections of doctors, politicians, and

popular opinion. Much of what they advocated is now considered common knowledge, but it was revolutionary in its day.

## Dr. Albert Schweitzer: He Lived His Argument

Like Nightingale, Schweitzer had always felt a powerful longing toward direct service to humanity and, like Nightingale, his moment of direction came suddenly. Born in 1875, Schweitzer was a medical missionary, theologian, and philosopher with ties to France and Germany. In 1904, he read an article in the Paris Missionary Society's publication signifying a pressing need for physicians in the French colony of Gabon in Africa. Hundreds of young men and women read this piece, but few were as affected as Albert Schweitzer. When he had completed the article, he put the magazine away and quietly began his work. But his search was over. He saw his time and place and future; his life took clear shape (Ives & Valone, 2007).

Again, like Nightingale, Schweitzer did not receive support from family and friends for his calling. Despite this resistance, he began medical studies at the age of 30, receiving his degree, with a specialization in tropical medicine and surgery, some eight years later. What he had failed to anticipate was the Paris Missionary Society's refusal to employ his services. Today, we would characterize the Paris Missionary Society's view of Albert Schweitzer as a person who was "politically incorrect," just like Nightingale. Both were considered radical in their time. Both were people of convictions with the moral courage to do for their patients what they needed done.

In March 1913, Dr. and Mrs. Schweitzer, a trained nurse, left for Africa to build their own hospital at Lambaréné in the French Congo, now Gabon. They focused on developing bonds of trust between hospital personnel and the local population. He treated thousands of people suffering from severe illnesses, such as malaria, sleeping sickness, skin sores, leprosy, dysentery, venereal diseases, and heart failure. Apart from occasional fund-raising visits to Europe, he continued his medical work in Africa for the rest of his life.

Dr. Schweitzer was known to have repeatedly said that "everyone must find his own Lambaréné" and that "My life is my argument." In his Nobel Prize acceptance speech in 1954, he spoke about the importance of rejecting war for ethical reasons, stating that war makes us guilty of the crime of inhumanity. He spoke about the importance of nurturing the human spirit so that humanity will have the moral courage to stand up against war. He said:

*The spirit is not dead; it lives in isolation. It has overcome the difficulty of having to exist in a world out of harmony with its ethical character. It has come to realize that it can find no home other than in the basic nature of man. The independence acquired through its acceptance of this realization is an additional asset.*

*It is convinced that compassion, in which ethics takes root, does not assume its true proportions until it embraces not only man but every living being. To the old ethics, which lacked this depth and force of conviction, has been added the ethics of reverence for life, and its validity is steadily gaining in recognition. . . . Once more we dare to appeal to the whole man, to his capacity to think*

*and feel, exhorting him to know himself and to be true to himself. We reaffirm our trust in the profound qualities of his nature (Nobelprize.org).*

What is most remarkable about this man was his unbelievable passion for learning and his energy for diverse experiences and work. He held doctorates in three major subjects—theology, philosophy, and medicine—and was a gifted organist and world authority on Bach. Schweitzer was not a philosopher of the abstract variety. He wrote many times that “he lived his argument,” and his actions certainly prove this. He is one of the great humanitarians of the twentieth century. His biography reveals a man willing to stand up for his convictions for the sake of his patients and for humanity (Brabazon, 2000).

Let us turn now to everyday people who demonstrated the moral courage that many lacked during World War II.

## Lessons From the Holocaust Rescuers

The three “participant” categories of the Holocaust are commonly identified as murderers, victims, and bystanders. But there were also rescuers, as discussed in *Rescuers: Portraits of Moral Courage in the Holocaust* (Block & Drucker, 1992). These courageous individuals provide firsthand accounts that help us understand an unfathomable time, that give us a sense of what it felt like to live under a brutal government or occupation. For *Rescuers*, Rabbi Malka Drucker interviewed 21 individuals who rescued from a few to hundreds of Jews from the death camps. What character traits did these individuals share? They showed compassion, empathy, an intolerance of injustice, and an ability to endure risk beyond what any of us can or wants to imagine. Just as we cannot forget the Holocaust, we must never forget those courageous individuals whose humanity transcended it.

Despite the diverse background of the rescuers, they shared one significant characteristic. Drucker stated “it wasn’t so much that I was in the presence of exceptionally virtuous ‘good’ people; in fact, they were quite ordinary people” (<http://www.malkadrucker.com/right.html>). It was more what Eva Fogleman has described as “the ability to transcend fear . . . and the ability to tolerate risk.” As one rescuer said when asked if she had been afraid, “At such times it is normal to be afraid.” Once the rescuers knew what was happening to the Jews, they felt compelled to help. Chapters 2 and 3 will discuss how to increase our tolerance of fear and to become better risk takers.

Most of the rescuers objected to being seen as heroes or saints. They saw themselves as people called to do what was right. They saw what the necessary moral action was, and they helped young and old survive. Today, they can stand as a reminder to all of us to ask ourselves, “For what moral issue will I stand up and be counted?”

## Barack Obama: A Politician With Moral Courage

In July 2004, Barack Obama electrified the Democratic National Convention with a speech that spoke to the hearts of citizens across United States. He spoke with optimism about our future, an optimism he called the “audacity of hope.” Today,

as we listen to his presidential speeches, we begin to believe that maybe, just maybe, we can again believe in goodness of America.

Like Plato, President Obama believes in public service. He spent years quietly toiling in Chicago's inner city, helping churches and underfunded community groups deliver services to the poor. And although he was elected the first African-American President of the *Harvard Law Review* in the journal's 104-year-history, he opted to turn down prestigious judicial clerkships and high-paying law firm jobs to return to Chicago to advocate for the poor and disenfranchised. To me, that spoke volumes about his commitment to public service. He received the education necessary to turn a talented person into a leading citizen. He, like Socrates, believes that an "unexamined life is not worth living." One need only read *Dreams from My Father* (2004) and *Audacity of Hope* (2006) to see the depth of his critical self-reflection.

Like Nightingale, President Obama has a sense of mission and a sense of commitment to social justice. In the *Republic*, Plato sketches the attributes of those who would lead a perfect political community. His "philosopher kings" are empowered to make decisions in the best interests of the community on the basis of reason, understanding of the common good, and a lifetime of gathering information through learning. According to Plato, the true political function is that of a guardian. Both Nightingale and Obama have shown a strong sense of duty to society and a fervor for reform. For both, it was not enough to know what was the good and right thing to do. Like Aristotle, they saw a need to put their beliefs into action. As I review Socrates' actions in Athens, Nightingale's letters to Sidney Herbert from the Crimea, and Obama's Web site messages, it is clear that they believe they were put on the planet for a greater service to God (LeVasseur, 1998; Vicinus & Nergaard, 1990; Obama, 2007a). The role of the Platonic guardian is to know the good and make proper decisions with all things considered. I believe our nation is now desperate for such a guardian.

But, specifically to the point of this book, what is Obama's plan for health care? It is both a plan for the United States and a plan for global action. It is not unlike Nightingale's plan for Britain and other parts of the world. Take one example. During Nightingale's life, sanitation issues stood front stage; today, the AIDS pandemic is a key issue in world health. Forty million people across the planet are infected with HIV/AIDS. Obama plans to create a National Health Insurance Exchange and to be a global leader in the fight against AIDS. The exchange is part of a larger program to provide all Americans with health insurance and improved health care.

As he said in a Speech in Iowa City on May 29, 2007:

*We now face an opportunity—and an obligation—to turn the page on the failed politics of yesterday's health care debates . . . My plan begins by covering every American. If you already have health insurance, the only thing that will change for you under this plan is the amount of money you will spend on premiums. That will be less. If you are one of the 45 million Americans who don't have health insurance, you will have it after this plan becomes law. No one will be turned away because of a preexisting condition or illness (Obama, 2007b).*

But Barack Obama more generally epitomizes moral courage by acknowledging the multiple moral problems in which we find ourselves rather than

turning away from them. What makes him morally courageous is that his behavior is consistent with his beliefs regardless of public opinion. He stood among only 22 of 100 senators in opposition to the decision to authorize the Iraq war. He sees the need for America to stand and accept the greatest responsibility to lead in the arena of environmental policy, as we are the world's largest producer of greenhouse gases. Like the Holocaust rescuers, he is motivated in his actions by justice and compassion. He has demonstrated Plato's cardinal virtues. He believes, as Aristotle did, that we must practice using courage and demonstrate this virtue to our young. He is not only a role model for African-American children, but for all children. He is facing the moral dilemmas—the question is will he be able to seize that moment and begin the world anew.

## Conclusion

Moral courage is a virtue; a virtue that puts into action the reasoning and wisdom acquired through education and experience. We need to ask ourselves the penetrating questions Socrates would ask. We need to recognize our fears without letting them stop us from being the patient advocates we are obligated to be as healthcare professionals. The next five chapters focus on developing the skills healthcare professionals and administrators need to “speak up” for our patients, for our community, and for the changes needed in our healthcare system.

## Key Points to Remember

1. Our discussion of moral courage begins with the founding fathers of philosophy—Socrates, Plato, and Aristotle. All three argue that education is the key to shaping an individual's character.
2. Socrates and his discussion partners determined that physical acts without the knowledge of good and bad (morality) can never be courageous.
3. Courage is one of the four cardinal virtues in the lasting tradition of moral character described by Plato.
4. Aristotle further refined his view of courage by focusing not on cardinal virtues, but on virtue of thought and virtue of character.
5. Martin Luther King, Jr., displayed both moral and physical courage as he died fighting for the moral principles in which he believed.
6. Nightingale's use of her talents, education, and connections to crusade for healthcare reform points to a broad political function concerned with a societal good.
7. Schweitzer spoke about the importance of nurturing the human spirit so that humanity will have the moral courage to stand up against war.
8. Holocaust rescuers saw themselves as people called to do what was right.
9. President Obama has a sense of mission and a sense of commitment to social justice.
10. Moral courage is a virtue that puts into action the reasoning and wisdom acquired through education and experience.

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