



International Association for
Education in Ethics

**11th International
Conference on
Ethics Education**

ETHICS EDUCATION, INTERDISCIPLINARITY and PLURIPERSPECTIVISM



**Zagreb (Croatia)
June 15–17, 2023**

www.bioetika.hr/iaee2023/



Faculty of Humanities and Social Sciences, University of Zagreb
Ivan Lučić Street, No. 3, Zagreb

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University Centre for Integrative Bioethics, University of Zagreb

Croatian Centre of Excellence for Integrative Bioethics

Croatian Bioethics Society

Croatian Philosophical Society



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VENUE:

Faculty of Humanities and Social Sciences, University of Zagreb
(Filozofski fakultet, Sveučilište u Zagrebu)
Ivan Lučić Street, No. 3, Zagreb

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INTRODUCTION

The core focus of the 11th International Conference on Ethics Education, titled *Ethics Education, Interdisciplinarity and Pluriperspectivism*, is on bringing together different scientific and cultural perspectives in the field of ethics education.

The role of ethics always was and still is to offer the life orientation (or meaning), the orientation within the entire sphere of knowledge, and the orientation in everyday situations in which moral dilemmas arise and moral decisions are demanded. It was and still is, also, the role of ethics education, which is more complex inasmuch as the ethics education presupposes mindful and systematic introducing into the ethical reflection and action. In the age of accelerated development of science, biotechnologies, and information and communication technologies, as well as data and information overflow, and social, political and economic turmoil, such role of ethics and ethics education becomes more important than ever.

Therefore, it is crucial to develop the models of ethics and ethics education which would be able to respond to challenges of the time. In that sense, concepts of interdisciplinarity and pluriperspectivism, i.e. the concept of *integrative bioethics*, may serve as a basis for ethical reflection, discussion and decision-making on complex problems which can be neither articulated nor solved from perspective of a single science or worldview. *Interdisciplinarity* refers to gathering of and dialogue between various scientific disciplines and areas (natural sciences, technical sciences, biomedical and health sciences, biotechnical sciences, social sciences, humanities), as well as finding a way in which these disciplines would collaborate and overcoming of their mutual differences, while *pluriperspectivism* refers to the incorporation and mediation through dialogue of not only scientific but also of non-scientific (so-called cultural) contributions, including different modes of reflection, different traditions of thought and culture, i.e. diverse views that rest on cultural, gender, religious, political and other specificities.

Such interdisciplinary and pluriperspectivist approach does not underestimate and reject the usefulness and necessity of “instrumental knowledge”, inherent to so-called exact sciences, but it emphasises the importance of “orientation knowledge” (Jürgen Mittelstrass), which is, essentially, ethically impregnated. How to establish such a form of knowledge, promote it throughout the sciences and communicate it through education – are the possible starting questions in re-thinking the topic *Ethics Education, Interdisciplinarity and Pluriperspectivism*.

This general framework leaves room enough for issues such as:

- Meaning and aims of ethics education,
- Philosophical theories and approaches in ethics education,
- Methods of ethics education,
- Ethics education between science, philosophy and religion,
- Scope and implications of the concepts of interdisciplinarity and pluriperspectivism,
- Possibilities of and obstacles to the interdisciplinary communication and collaboration,
- Cultural differences and the problem of cultural and ethical relativism,
- Historical approaches to ethics education,
- Economic and political aspects of ethics and ethics education,
- Classical and contemporary approaches to the relationship between theory, practice and poiesis,
- Relationship between data, information and knowledge,
- Relationship between knowledge, science and truth,
- Critical thinking in ethics education,
- Ethics education and the bioethical challenges in (bio)medicine,
- Ethics education and the bioethical challenges in ecology,
- Ethics education in context of the nature vs. nurture debate,
- (Ethical) education vs. (moral) enhancement: nurture vs. nature debate in a new context,

- Similarities and differences between primary school, secondary school and high school ethics education,
- Ethics education in the curricula of the studies of natural, technical, biotechnical, biomedical and health sciences,
- Psychological presuppositions of ethics education,
- Education sciences and ethics education,
- Ethics education for educators,
- Ethics education for engineers,
- Ethics education for the ethics committees' members,
- Ethics education for journalists,
- Intersection of law and ethics in ethics education,
- Ethics education and the issues of human rights, active citizenship and social engagement,
- Role of artistic creativity and particular kinds of art in ethics education,
- Role of physical activities and sport in ethics education.

CONFERENCE PROGRAMME

THURSDAY, June 15, 2023
Programme overview

	HALL D-7	HALL D-5	HALL D-6	ADDITIONAL ACTIVITIES
12:00 PM – 3:00 PM				Registration (in the lobby of the Faculty)
3:00 PM – 3:45 PM	Opening ceremony			
3:45 PM – 4:45 PM	PLENARY LECTURE: Srećko Gajović (Croatia) The Competences of the Global Citizen and the Need for Ethical Education <i>Chair:</i> Hrvoje Jurić			
4:45 PM – 5:00 PM				Break
5:00 PM – 6:00 PM	PLENARY LECTURE: Berna Arda (Türkiye) Gender in Ethics Education: A Limited Experience from Interdisciplinary Point of View <i>Chair:</i> Henk ten Have			
6:00 PM – 7:30 PM				Welcome drinks and snacks (in the lobby of the Faculty)

FRIDAY, June 16, 2023

Programme overview

	HALL D-7	HALL D-5	HALL D-6	ADDITIONAL ACTIVITIES
9:00 AM – 10:00 AM	PLENARY LECTURE: Renzo Pegoraro (Italy) Digital Teaching, Artificial Intelligence, and Challenges for Ethics Education <i>Chair: Ana Borovečki</i>			
10:00 AM – 10.20 AM				Coffee break (in the lobby of the Faculty)
10:20 AM – 1:00 PM	PARALLEL SESSION 1a	PARALLEL SESSION 1b	PARALLEL SESSION 1c	
1:00 PM – 2:00 PM				Lunch (in the lobby of the Faculty)
2:00 PM – 3:00 PM	WORKSHOP: Jos Welie & Linda Scheirton (France) Designing an Intensive Interdisciplinary Course on Research Methods in Applied Ethics			
3:00 PM – 3:10 PM				Break
3:10 PM – 5:30 PM	PARALLEL SESSION 2a	PARALLEL SESSION 2b	PARALLEL SESSION 2c	
5:30 PM – 6:10 PM			General Assembly of IAEE	
6:30 PM – 8:30 PM				Walking tour of Zagreb
8:30 PM				Conference dinner (in the city centre)

SATURDAY, June 17, 2023
Programme overview

	HALL D-7	HALL D-5	HALL D-6	ADDITIONAL ACTIVITIES
9:00 AM – 11:20 AM	PARALLEL SESSION 3a	PARALLEL SESSION 3b		
11:20 AM – 11:40 AM				Coffee break
11:40 AM – 12:00 PM	Concluding discussion and closing of the conference			

PARALLEL SESSIONS
Friday, June 16, 2023 (morning)

	1a HALL D-7 Chair: Renzo Pegoraro	1b HALL D-5 Chair: Berna Arda	1c HALL D-6 Chair: Joris Gielen
10:20 AM – 10:40 AM	Ralf Stutzki Rethinking Bioethics in Light of Engineering Life Technologies	Tom Børsen; Egle Butkeviciene Comparing Responsible Research and Innovation Teaching in Engineering and Social Sciences	Enrique Benjamin R. III Fernando Quasi-Expressivism and the Language of Mental Disorder Attribution
10:40 AM – 11:00 AM	Ian M. Doherty The Hermeneutics of Nudging: The Reciprocity between Transhumanism and Nudging	Benjamin Who; Jesse Hu An Integrated Ethics-STEM Curriculum for Secondary School Students	Mariah Chobany The Presence of Clinical Ethics Consultations within Inpatient Psychiatric Hospitals: An Analysis of Patient Rights and the Need for Psychiatric Ethicists
11:00 AM – 11:20 AM	Matija Mato Škerbić On the Role of Physical Activities and Competitive Games in Aristotle’s Account of Education: The Sport Philosophy Perspective	Suaad Alarifi; Sidney Engelbrecht Ethics Education and Training in Higher Education for Information Technology Students and Researchers in Saudi Arabia	Rachelle E. Thannhauser; Zoe A. Morris; Nicholas Gamble Ethical Decision-Making of Mental Health Practitioners in Therapeutic Work with Young People: A Systematic Review
11:20 AM – 11:40 AM	Milan Hosta Modelling Character Development and Integrity through Competitive Tensegrity in Sport	Qosay Al-Balas The Current State of Medical School Education in Ethics/ Bioethics in Jordan	Kevin G. Behrens An Ubuntu-Based Account of the Obligation to Teach South African Medical Students that neither Sex nor Gender Is Binary

PARALLEL SESSIONS
Friday, June 16, 2023 (morning)

	1a HALL D-7 Chair: Renzo Pegoraro	1b HALL D-5 Chair: Berna Arda	1c HALL D-6 Chair: Joris Gielen
11:40 AM – 12:00 PM	Hanzade Dogan Online Learning for Ethics Education: A Global Final Exam	Sabina Girotto Vulnerability and the COVID-19 Pandemic: Educating to a New Notion of Health	Luciana Caenazzo; Pamela Tozzo; Ana Borovečki Implementing a Group-Based Active-Learning Approach in Medical Education: An Example of Integrative Ethics and Professionalism in Rehabilitation
12:00 PM – 12:20 PM	Anna Meurer; Courtney E. Thiele Opportunities to Increase Translational Thinking and Build Community in Online Courses through an Expanded View of Resource Diversity	Ana Isabel Magalhães; Fernanda Carvalho; Ana Paula França Enhancing Ethics Education from Experience: Ethics and Humanized Care in Neonatal Nursing Amid the COVID-19 Pandemic	Susan Fox Ethical Mnemonics: Surrogate Decision-Makers and the “Best Interests” Standard
12:20 PM – 12:40 PM	Roberto Mužić; Lea Murn; Marko Ćurković Should We Think More and Know Less or Another Way Around? Uses of Artificial Intelligence Based Large Language Models in Medical Education and Its Potential Consequences	Ahsan Al Alhindi End of Life Choices: DNR in Catholicism and Islam	Dušanka Krajnović; Andrijana Milošević Georgiev; Tatjana Crnjanski; Ljiljana Matović The Attitudes of Community Pharmacists Towards Compromising Their Ethical Values and Conscientious Objection
12:40 PM – 1:00 PM	Mariëtte van den Hoven; Hanneke Mol; Roald Verhoeff Evaluating Empowerment towards Responsible Conduct of Research in a Small Private Online Course	Giulia Adele Dinicola Medical Assistance in Dying: The Ethicality of Educating Children on Euthanasia through a Canadian Activity Book	Branka Gabrić Is There a Need for Specific Ethics Education in the Context of the Management of Chronic Conditions?

PARALLEL SESSIONS
Friday, June 16, 2023 (afternoon)

	2a HALL D-7 Chair: Ercan Avci	2b HALL D-5 Chair: Marko Ćurković	2c HALL D-6 Chair: Luciana Caenazzo
3:10 PM – 3:30 PM	Ivana Zagorac Ethics Education between Positivism and Critical Pedagogy	Gábor Kovács Teaching Business Ethics in the Anthropocene	Lena Stange Ethical and Health Literacy for a Good Life? Results of a Qualitative Study on Moral Values in Advance Directives
3:30 PM – 3:50 PM	Elianne M. Gerrits; Lars S. Assen; Annelies Pieterman-Bos; Annelien L. B. Bredenoord; Marc H. W. van Mil Perspective Taking as an Approach to Increase Students’ Moral Sensitivity	Jan Defrančeski Arne Næss and Deep Ecology in the Context of Ethics Education	Emmanuel Uchechukwugeme Ogbu Navigating the Ethical Web: Addressing Cultural Differences and the Problem of Cultural and Ethical Relativism in Ethics Education
3:50 PM – 4:10 PM	Lydia Feito; Tomás Domingo-Moratalla Narrative Deliberation: A Model for Ethics Education	Ana Marušić; Anna Catharina Vieira Armond; Benjamin Benzoni; Maja Gligora Marković; Danijel Gudelj; Sandra Kostić; Anita Lunić; Eli Marušić; Stjepan Ljudevit Marušić; Vanja Pupovac; Tamara Radojčić; Rea Roje; Rafaely Stavale; Dina Šimunović; Ružica Tokalić; Vicko Tomić; Marin Vidak; Marija Franka Žuljević; Ivan Buljan “I” in Research Integrity: Introducing an Art Session into a Research Integrity Course	Rob Anderson; Ana Molina; Tiphaine Kirner; Sidney Engelbrecht Building the Next Generation of Ethical Decision-Makers through Ethics Education and Training

PARALLEL SESSIONS
Friday, June 16, 2023 (afternoon)

	2a HALL D-7 Chair: Ercan Avci	2b HALL D-5 Chair: Marko Ćurković	2c HALL D-6 Chair: Luciana Caenazzo
4:10 PM – 4:30 PM	<p>Yolande Voskes; Mariëlle Diepeveen; Guy Widdershoven</p> <p>Integrating Ethics and Law in Medical Education: Development, Content and Evaluation of a Three Weeks Bachelor Course</p>	<p>Igor Lukić</p> <p>Ethics Education in High School in Croatia: How the New National Curriculum for Ethics Was Created, Why It Almost Disappeared, and How It Changed Ethics Education in Croatia</p>	<p>Scott A. Dyer; Brianne C. Helfrich</p> <p>Investigating the Broad Ethical Dilemmas Faced by Incarcerated Patients in the United States Seeking Healthcare and How to Overcome Them</p>
4:30 PM – 4:50 PM	<p>Mariëlle Diepeveen; Mariëtte van de Hoven; Yolande Voskes</p> <p>Assessing Student Competencies in the Bachelors' Medical Curriculum: A Qualitative Study about the Experiences of Students and Teachers with the OSCE for Ethics, Law, Diversity, and Patient Safety</p>	<p>Hrvoje Jurić</p> <p>Ethical Issues in the Croatian Gymnasium Curriculum of Philosophy and Related Philosophy Textbooks</p>	<p>Telma Rejane dos Santos Façanha; Isis Layne de Oliveira Machado; Volnei Garrafa</p> <p>The Inclusion of Bioethics Teaching When Implementing the Practice of Disclosure in Healthcare for the Elderly in Brazil</p>
4:50 PM – 5:10 PM	<p>Banu Buruk; Perihan Elif Ekmekci; Emre Demirkaya</p> <p>Survey of Medical Students' Experiences of the Activities of TOBB University of Economics and Technology International Chair in Bioethics</p>	<p>Željka Winkler</p> <p>Teaching Ethics in Vocational Education in Croatia</p>	<p>Joris Gielen; Anjum S. Khan Joad; Sushma Bhatnagar; S. K. Chaturvedi</p> <p>Preferences for Ethics Education: The Views of Members of the Indian Association of Palliative Care</p>
5:10 PM – 5:30 PM	<p>Ajediran I. Bello; Matilda Asante; Solomon Laar; Hosea Boakye</p> <p>Ethical Competency in Allied Health Professions: Identifying the 'Wrongs' to Safeguard the 'Rights' in Patients' Care – A Workshop Proceedings of AHPC-Ghana, 2022</p>	<p>Katarina Gamberger</p> <p>Ethical Education in the Croatian Elementary Schools</p>	

PARALLEL SESSIONS
Saturday, June 17, 2023 (morning)

	3a HALL D-7 Chair: Hrvoje Jurić	3b HALL D-5 Chair: Jos Welie	3c HALL D-6 Chair: Jan Defrančeski
9:00 AM – 9:20 AM	Nico Nortje Improving Interdisciplinary Communication and Collaboration to Impact Better ACP Conversations	Eva C. A. Asscher Improving Motivation for Ethics Education within Medicine	Lea Murn; Roberto Mužić; Marko Čurković I Know the Right Thing to Do but I Just Can't Do It: The Role of Moral Distress in the Education of Healthcare Professionals
9:20 AM – 9:40 AM	Leopoldo Sandonà Ethics, Transdisciplinarity and Orientation: Two Cases from Italian Context	Fayla Junior Methods to Madness: An Educational Approach to Clinical Consultation	Ivan Pavao Gradiški; Marko Čurković; Ana Borovečki Protective Factors against Burnout in International Medical Students
9:40 AM – 10:00 AM	Jason T. Eberl An Integrated Clinical Ethics Curriculum for Medical Students	Ercan Avci The Impact of Ethics Education in Ethics Consultation on the Therapeutic Relationship	Daniel J. Hurst The Utility of a Bioethics Doctorate: Results of a Survey of ABD Students and Graduates from US Bioethics Doctoral Programs

PARALLEL SESSIONS
Saturday, June 17, 2023 (morning)

	3a HALL D-7 Chair: Hrvoje Jurić	3b HALL D-5 Chair: Jos Welie
10:00 AM – 10:20 AM	Jason T. Eberl Contribution of Philosophical Methodology to Bioethics Education	Anamaria Malešević; Maria Kolesarova; Anto Čartolovni I (Don't) Understand How Medical AI Works: Attitudes of Medical Students on Ethical Issues of Digital Technologies Applied in Healthcare
10:20 AM – 10:40 AM	Ignaas Devisch Interdisciplinary Ethics and Philosophy Teaching in Medical Sciences: How Ethical Reasoning and Clinical Reasoning Should Be Two Peas in a Pod	Antonija Mijatović; Marija Franka Žuljević; Luka Ursić; Nensi Bralić; Ana Marušić; Vladimir Ercegović How Good Are Medical Students in Detecting Duplications in Digital Images from Research Articles: A Cross-Sectional Survey
10:40 AM – 11:00 AM	Kiarash Aramesh Science, Pseudoscience, and the Bioethical Limits of Pluriperspectivism in Ethics Education	Eimantas Peičius; Žydrūnė Luneckaitė; Aušra Urbonienė; Gvidas Urbonas Developing the Students' Competences in Research Ethics: A Case of Lithuanian University of Health Sciences
11:00 AM – 11:20 AM	Ignace Haaz What Is a Reasonably Interdisciplinary Work? An Analysis and Some Examples Borrowed from Ethical Research and the History of Philosophy	Abdullah Yıldız; Ayşe Kurtoğlu; Farzad Moghaddam Samira; Berna Arda Medical Students' Opinions on Their Experience of Applying to Research Ethics Committees: A Qualitative Study

PAPER ABSTRACTS

Prof. Berna Arda, MD, PhD

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Gender in Ethics Education: A Limited Experience from Interdisciplinary Point of View

Background. Gender concept from daily medical practice point of view seems like one of the most crucial points providing the best care to patients. “Sex” describes some characteristics brought by birth based on the reproductive functions of people and emphasizes the biological dimension; on the other hand, “gender” looks like a close concept but actually is far beyond this dimension. It has been pointing to a concept that it is shaped by social and cultural factors. In the light of gender concept, we have to be aware that these are the roles of femininity and masculinity that are not brought by birth but instead have been determined socially and culturally. There are rigid prejudgements that show differences between societies.

Aim/purpose. Especially when the references that are made to social and cultural differences are considered, the term “gender” is used wider to denote a range of identities that do not correspond to established ideas of men and women. According to the relevant literature, ideology of gender role, gender blindness, gender inequality, and masculine bias do strike us as the realities for medicine today. The aim of this presentation is to describe the place of gender subject in educational dimension of the undergraduate medicine.

Empirical methods and/or theoretical perspective. In the first step a relevant literature evaluated from theoretical point of view, after that the place of gender subject in medical schools' undergraduate programs searched on publicly open websites. Women's studies departments information also obtained as an additional source.

Results, outcomes and implications. The findings shown the actual relevant situation of undergraduate medical education in Turkey (Türkiye) and observed that there are some limitations concerning with the structural difficulties.

Conclusions. The problems that depend on gender are natural subjects of the bioethics. Bioethics as an academic field is interested in value problems to identify and to analyse with a critical approach. There are many situations in which women were in the centre and require elaborate bioethical evaluation. The author's training experience on gender and bioethics as one of the rare samples in the field of Women's Studies Master and Doctorate Program, will be shared in this presentation. The need of structural improvements in the educational and legislative aspects will be emphasized.

Keywords: gender; medicine; medical ethics; ethics education

PLENARY LECTURE

Prof. Srećko Gajović, MD, PhD

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The Competences of the Global Citizen and the Need for Ethical Education

Background. The technological advances of humanity created truly global society. Moreover, the digital capabilities extend the human reach even further, outside the Earth-bounded reality, by adding the virtual spaces to the global geography. The resulting digital society is characterized by seamless transition between off-line and online realms. The new situation connects unprecedented possibilities with unprecedented challenges.

Aim/purpose. To discuss the novel competences of global citizen needed for the survival of the humanity and to relate them to the ethical education.

Empirical methods and/or theoretical perspective. The globalized humanity represents an example of a complex system. The small local perturbations influence and contribute to the global equilibrium. The major feature of the complex system is its adaptability. The different mechanisms to facilitate and reach this adaptability, and the barriers on this path will be discussed and examples from other complex systems instructive to the global challenges for the humanity given.

Results, outcomes and implications. The principal elements of the global humanity as a complex system are citizens. The ethical values are already in place and from a historical perspective contribute to the societal cohesion. The ethical education with specific emphasis on the global empathy is needed and necessary at the global level. As predicted by Zagreb School of Integrative Bioethics, we live in the Age of Bioethics.

Conclusions. The survival of humanity is on stake, and the citizens are to be educated that their individual action can save it. The ethical principles are in the fundamentals of global humanity and the ethical education of a global citizen results with competences needed for the adaptability of the complex system ensuring the humanity future.

Keywords: bioethics; global society; digital society; ethics education

PLENARY LECTURE

Prof. Renzo Pegoraro, MD, PhD

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Digital Teaching, Artificial Intelligence, and Challenges for Ethics Education

Background. The widespread recent experiences of digital teaching and the use of artificial intelligence (AI), particularly in the field of ethics and bioethics, need analysis and discussion about the risks and benefits.

Aim/purpose. The aim of this lecture is to highlight the risks and benefits of digital teaching and the characteristics of so-called “ethics by online”

Empirical methods and/or theoretical perspective. Some risks: reductionism, focus more on facts and empirical data; schematization and oversimplification with the risk to focus on technical or organizational conclusions that are not a “true” ethical deliberation, a real moral “decision-making process”; lack of expressions and emotions; compromising of the “quality of listening”; possibility of “hiding”. Benefits: saving on travel and movements; flexibility of schedules; possibility to record and review of lectures and discussion; putting all on an equal footing.

Results, outcomes and implications. There are some open and urgent discussions, concerning the so-called “ethics by online”: Which kind of ethical discourse, reflection and analysis, are possible by online? The role of the used platform and which procedures can be developed for productive discussion of ethics? Does the online “form” affect the content of the discussion? Does digital mediation affect the “courage of truth”? What are the implications of the possibility of recording meetings and lectures?

Conclusions. The challenge is not only to share information, but to carry out a real ethical discussion and process of teaching/learning. The Rome Call for AI Ethics (Rome, 2020) provides some interesting perspectives for education, particularly in the area of ethics using AI.

Keywords: artificial intelligence (AI); ethics; bioethics; ethics education

WORKSHOP

Prof. Jos Welie, JD, PhD & Prof. Linda Scheirton, PhD

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Designing an Intensive Interdisciplinary Course on Research Methods in Applied Ethics

Background. The Saint André International Center for Ethics and Integrity, as part of its 2023 series of intensive seminars, will be offering a 9-day educational seminar on “Interdisciplinary Research Methods in Applied Ethics” (August 9–17, 2023) (www.saintandre.org). Since it is evidently impossible to render the seminar attendees competent in all methods currently used to undertake applied ethics research, the focus will be on the benefits and challenges of interdisciplinarity. While much has been written about interdisciplinary education more generally, far less has been written on interdisciplinarity in the normative domain, and even less on teaching the latter.

Context. Applied ethics education almost always occurs within an interdisciplinary arena, since the students enrolled in such courses usually do not study ethics as their main discipline, but some other discipline, whether nursing, engineering, or journalism. Teachers of such applied courses know well that such courses will be experienced by the enrolled students as relevant and interesting only if their primary disciplines, which requires the ethics teachers to “cross over” into those disciplines. But the new call for an interdisciplinary approach to research in ethics seeks to supercede this basic level of interdisciplinarity.

Program of the workshop. In this workshop, the objectives of aforementioned new intensive summer seminar will be presented as well as the planned learning strategies. A cursory comparison with existing courses on interdisciplinary research methods in applied ethics will underscore similarities and differences. However, given that we are dealing here with uncharted terrain, we have intentionally structured this session as a workshop. We hope to obtain input and advice from the workshop participants about the optimal design of the aforementioned intensive seminar on interdisciplinary research methods in applied ethics. Hence, most of the time in this workshop will be reserved for exchange of ideas and critical discussion.

Keywords: ethics education; teaching interdisciplinarity; interdisciplinary ethics research; intensive course

SUAAD ALARIFI¹, SIDNEY ENGELBRECHT²

Ethics Education and Training in Higher Education for Information Technology Students and Researchers in Saudi Arabia

Background. Teaching philosophy, including ethics, research ethics and integrity at undergraduate and postgraduate level and beyond is essential for academic and professional development. The same applies for ethics education and training at the King Abdullah University of Science and Technology (KAUST) and King Abdulaziz University (KAU) in the Kingdom of Saudi Arabia (KSA). Technology is involved in almost every aspect of our life, for example, the health sector, military, services, retail, manufacturing, banking, communication, and transportation. All these sectors are heavy users of technology. Even agriculture where Global Positioning System (GPS), satellites, drones and farming software are entering the agriculture industry and making a difference. There is a high dependence on technology in combined with the huge amount of personal data collected, analyzed and stored every day which increased the importance of research ethics training and teaching to individuals especially researchers and technology developers.

Aim/purpose. Against this background, the aim of this paper is to show that ethics training and education occurs at least at two universities in the KSA. Collaboration between universities is key to share best practices and expertise in ethics teaching and training. As a research university in science and technology, researchers might not hold prior ethics education or training in their undergraduate and further training. It is therefore paramount that they obtain ethics training to ensure that research is done ethically – even in cases where researchers work on secondary datasets and information systems.

Empirical methods and/or theoretical perspective. Teaching ethics to undergraduate and postgraduate students will help in controlling the side effects of technology using such as privacy breaches, security incidents, and critical systems failures. It will also improve the growth of technology by enhancing trust on technology, integrity, sustainability, resilience, responsibility, duty of care, due diligence, etc. Information technology undergraduate students should learn the basics of professional ethics with a focus on ethics in information technology (IT). While for postgraduate students and researchers, the focus should be on research ethics and integrity.

Results, outcomes and implications. This collaboration would prove to be rewarding by sharing teaching experiences and subject matter expertise. The implication is profound in that students and researchers gain first-hand knowledge about potential ethical dilemmas and considerations in the field of IT. In the study of pure AI, big data and machine learning, ethics principles are often not included in the content of such subjects. This course shows the linkage between ethics and information management. This would enable students and researchers to consider ethical principles when working on human research participant data in information management and to ensure that ethical practices are adhere when working on such data.

Conclusions. The sharing of subject matter expertise is crucial in the teaching of ethics in AI and related matters. This teaching collaboration therefore add significant value in promoting ethical considerations in the information systems world.

Keywords: ethics education; information systems; research ethics; research integrity

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The Current State of Medical School Education in Ethics/Bioethics in Jordan

Background. Undergraduate ethics teaching becomes an important subject that medical faculties have included in their study plans in Jordan. The unprecedented technological advancements have forced medical schools to include specific courses of ethics capable of dealing with these issues. Within the last two decades, study plans have improved continuously by giving ethics subjects more and more attention to cope with the international interest in teaching these subjects.

Aim/purpose. Seeking competent graduates who are able of managing challenging ethical issues at their service sites is of paramount importance to their employers. Local and global institutions grant high priority in recruiting competent employees who are able to confront demanding ethical scenarios successfully and skillfully.

Empirical methods and/or theoretical perspective. Investigation of the study plans of all medical schools at Jordanian institutions and analyze their content and topics covered. The resumes of the instructors of these courses will be inspected to evaluate their qualification to teach such ethics courses.

Results, outcomes and implications. Within this work, a series of queries related to ethics teaching at Jordanian universities will be discussed. These topics are: (1) the advancement of ethics teaching in the last two decades in the Jordanian medical schools; (2) the current state of ethics teaching and its effectiveness based on published work in this field; (3) the reasons behind the interest of medical schools to teach such courses; (4) the role of national and international accreditation bodies in orienting policy makers to bring ethics to the front; (5) a brief evaluation of the effectiveness of introducing such courses for the undergraduate students; (6) a quick look of the content of such courses taught to the students; (7) Are the faculty members eligible and capable of teaching these courses?; (8) What future plans concerning these issues and how this will affect the postgraduate studies in these fields?

Conclusions. A recommendation at the end of this study to be issued that will be sent to the Jordanian accreditation body and the targeted institution for further improvements in the field of ethics education.

Keywords: ethics teaching; curriculum; accreditation parameters

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End of Life Choices: DNR in Catholicism and Islam

Background. The DNR order is a medical directive instructing healthcare providers not to perform CPR if a patient's heart stops beating or breathing ceases. While the Catholic Church and Muslims both prohibit assisted suicide and euthanasia, they differ on the permissibility of withholding or withdrawing life-sustaining measures. The Catholic Church permits the cessation of such measures, while Sunni Muslims allow it only when three reliable and qualified doctors certify that the patient's condition is not particularly encouraging. However, Shia resources forbid removing life-sustaining measures if it causes the patient's heart to stop beating, even if it is necessary to link them to another patient. Educators in education ethics can use this paper to design curricula and training programs that foster an understanding of the complexities and nuances surrounding DNR orders and end-of-life decisions in different nations and religious traditions.

Aim/purpose. This paper examines the controversy surrounding the Do-Not-Resuscitate (DNR) order in Catholicism and Islam. Additionally, it provides insight into the ethics and religious beliefs that guide end-of-life decisions in Catholicism and Islam, highlighting the complexities and nuances surrounding DNR orders and their interpretation in different religious traditions.

Empirical methods and/or theoretical perspective. (1) *Empirical methods.* This study utilized a research design based on a review of reliable sources to explore the perspectives of Islam and Catholicism on DNR. A systematic literature review was conducted to identify relevant published studies, books, and other reliable sources on DNR in Islam and Catholicism. (2) *Theoretical perspective.* The theoretical perspective guiding this study was based on the bioethics approach, which emphasizes the integration of ethical principles and values into healthcare decision-making. Within this approach, the principles of autonomy, beneficence, non-maleficence, and justice are considered fundamental to ethical decision-making in healthcare.

Results, outcomes and implications. This study explored the unique perspectives of Islam and Catholicism on DNR, revealing similarities in end-of-life care. The study highlights the need for healthcare providers to be aware of and sensitive to religious beliefs and practices, and suggests that a culturally sensitive approach may improve patient satisfaction and decision-making. The study's implications include the importance of increased awareness and knowledge for healthcare providers, policy consideration of religious perspectives, and the role of religious leaders in educating communities on the ethical and religious dimensions of end-of-life care.

Conclusions. The findings suggest that healthcare providers should be aware of and sensitive to religious beliefs and practices, and that such an approach may lead to improved patient satisfaction and decision-making. Education ethics play an important role in ensuring that healthcare providers and religious leaders have the knowledge and skills necessary to provide culturally sensitive care that respects the beliefs and values of patients and their families.

Keywords: religion; education; health; ethics

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Building the Next Generation of Ethical Decision-Makers through Ethics Education and Training

Background. Research ethics and integrity education is an integral part of a researcher's professional development to reach ethical maturity. At the King Abdullah University of Science and Technology (KAUST), we ensure that our research community (postgraduate students, postdoctoral fellows, research scientists, and faculty) enjoys access to workshops and courses on ethics and integrity in research. The KAUST research community is multi-national and comes from different cultural beliefs and backgrounds. To accommodate this, the Research Compliance Team purposefully developed three bespoke courses to educate our research community about internationally accepted best practices in research ethics and integrity, and research compliance. We believe that by offering these courses to our research community, we are empowering ethical research to occur. These courses are not yet mandatory, but the research community is encouraged by university leadership to attend them.

Aim/purpose. This paper aims to show that ethical decision-making is pivotal in the context of research that would have a positive, long-lasting benefit to KAUST and society. By educating our research community to become ethical decision-makers, KAUST is building a cohort of ethical researchers for the present and beyond. Through ethics education, we expose our research community to ethical dilemmas that they may experience during their research career and provide tools to guide them to reach a decision based on ethical considerations.

Empirical methods and/or theoretical perspective. The in-house ethics training that we offer occurs by means of in-person attendance by our research community. This includes case studies that highlight ethical dilemmas throughout the research cycle; i.e., during the research process (collecting data) and communicating findings. Additionally, our research community learned about recognized international and national instruments such as guidelines, codes, standards, norms, laws, institutional policies, and procedures in relation to research ethics and integrity. The research community is encouraged and guided on how to approach and resolve research-related disputes.

Results, outcomes and implications. The primary outcome is to produce ethical decision-makers and to enable ethical research; however, creating awareness of the responsibilities of our research community throughout the research cycle is paramount. This resulted in frequent post-course consultations between our research community and the Research Compliance Team on research compliance-related matters. Our greatest achievement is creating an in-person platform for the research community to have a voice and to learn from sharing personal and professional experiences in dealing with ethical dilemmas in a multicultural context. The research community now understands the research compliance landscape and best practices. Over the last four months, since the inception of these ethics training opportunities, we have reached 133 members of our research community. About 10 participants (7.5%) have completed all three courses, and 33 participants (25%) have completed at least two courses.

Conclusions. While it is important to teach research ethics and integrity, especially at a research university like KAUST, it is equally if not more important to promote tools to enable ethical decision-making. Ethical decision-making coupled with knowledge about research ethics and integrity produces ethical researchers with integrity.

Keywords: ethics; research ethics; research integrity; decision-making

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Science, Pseudoscience, and the Bioethical Limits of Pluriperspectivism in Ethics Education

Background. The problem of health misinformation, in the form of health-related pseudoscience, has emerged, reached new heights, and caused various types of harm in the past decade, especially during the COVID-19 pandemic. Many branches of medical pseudoscience appeal to cultural traditions, such as religious or national heritages, to justify their presence, practices, and claims.

Aim/purpose. This paper argues that the principle of respect for cultural diversity should not be used to justify the promulgation or the use of pseudoscience. In addition, other bioethical principles require addressing health pseudoscience as a public health threat. Ethics education has an important role in accomplishing this bioethical duty.

Empirical methods and/or theoretical perspective. This paper adopts a principle-based approach to address the problem of health pseudoscience through a bioethical lens and explore the implication of its findings for the realm of ethics education. For this purpose, it appeals to the most renowned and globally consensual sets of principles of biomedical ethics to examine the ethical aspects of dealing with health pseudoscience in the domain of health education. The methodology includes identifying the relevant principles, analyzing the possible conflicts among them, and resolving the conflicts by weighing and balancing them.

Results, outcomes and implications. Respect for Cultural Diversity and Pluralism is one of the principles of UNESCO's Universal Declaration on Bioethics and Human Rights. In the realm of ethics education, concepts such as pluriperspectivism can be derived from this principle. There are other principles, however, that necessitate benefiting patients and avoidance of harming them, including the principles of Benefit and Harm in UNESCO's declaration, Beneficence in the Belmont Report, Beneficence and Nonmaleficence in Beauchamp and Childress's four-principle framework, and Scientific Validity in the NIH's framework for clinical research ethics. According to these principles, since health misinformation and pseudoscience are harmful and constitute noteworthy threats to public health, health systems and health providers are ethically required to avoid them and educate their patients about their risks.

Conclusions. The principles of Cultural Diversity and Pluriperspectivism are among the most important principles of contemporary bioethics, but they do not justify any type of advertising or use of medical pseudoscience. Bioethical principles of Benefit and Harm and Scientific Validity support such a limit for pluriperspectivism. This bioethical perspective needs to be reflected in and supported by the institute of ethics education. All the programs of ethics education for health-related disciplines and professions should include awareness and knowledge about the problem of health pseudoscience, including an emphasis on the fact that the principle of respect for cultural diversity and the notion of pluriperspectivism are very important but should not be exploited to justify harming patients and the society by propagating and purveying medical pseudoscience.

Keywords: scientific validity; ethics education; pseudoscience; pluriperspectivism

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Improving Motivation for Ethics Education within Medicine

Background. Many teachers of ethics as one of the subjects in for instance medicine, experience difficulties motivating students. There are many reasons for this that one can think of, such as an overly filled curriculum, a desire to focus on the core of the subject being medical knowledge, lack of clarity about the need and use of ethics in daily medical practice and the expectation that it is easy to pass your ethics assignments whether or not you have attended the class.

Aim/purpose. Here we present several ways to enhance motivation for ethics education in medicine and compare these with theories of motivation.

Empirical methods and/or theoretical perspective. We start with several examples of adjustment in teaching to enhance motivation for ethics education in medical students. We compare these with theories of motivation in particular attempts to move from extrinsic motivation to (more) intrinsic motivation through increased relevance (ARCS model), competence and relatedness (self-determination model).

Results, outcomes and implications. In the early years, medical students in the Netherlands have very little exposure to practice, whilst they are intrinsically motivated to reach practice and face the challenges there. One approach we have taken to increase the relevance of ethics for the students is to co-teach with clinicians with an appreciation of the ethical aspects. We then use a real life case from the clinic to explore the complexities with the students. This is one way of making the subject more relevant and perhaps increase the motivation through ARCS model. In smaller group setting it is possible to enhance motivation through both relatedness and competence. Once students are practicing reasoning and learning to navigate through ethical dilemmas in safe and cooperative settings, this can enhance their feeling of competence. Enthusiastic teachers may further increase their motivation through relatedness. However, these methods improve motivation for some, but not all students. One of the questions to explore is whether other theories on motivation might be taken into teaching practice in order to increase motivation.

Conclusion. In order to achieve good learning in the medical students, it is necessary to enhance their motivation. The standard approaches of increasing relevance, enhancing competence and building on relatedness have improved motivation for some of our students. Expectancy theory might give us additional tools to build on the extrinsic motivation students have to pass their tests, to improve their learning through serious effort and (larger) reward.

Keywords: medical ethics education; motivation

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The Impact of Ethics Education in Ethics Consultation on the Therapeutic Relationship

Background. The therapeutic relationship requires effective communication between healthcare professionals and patients to produce outcomes aligned with patients' values, expectations, and interests. Professional ethics codes, such as the code of medical ethics, encompass certain norms to standardize their members' patterns of conduct. However, contemporary clinical ethics transcends professional codes by considering patients a primary stakeholder in healthcare and encourages close collaboration between healthcare professionals and patients. Nevertheless, physicians' traditional beneficence-oriented motivation and medical knowledge- and experience-driven focus may result in caregivers' authoritarian attitudes and paternalistic approaches. This possibility necessitates establishing a proper mechanism to avoid the ethical infringements of patients' rights, values, and preferences. In this context, ethics consultation is essential to identify, analyze, and resolve ethical concerns, uncertainties, and dilemmas by generating an ethics-friendly environment in healthcare organizations. At that point, ethics education is vital in ethics consultation to raise awareness, advance ethical standards, and promote best practices.

Aim/purpose. This oral presentation aims to address the positive impact of ethics education in ethics consultation to develop an ethically acceptable therapeutic relationship.

Empirical methods and/or theoretical perspective. The oral presentation will evaluate the impact of ethics education in ethics consultation on the therapeutic relationship through a normative perspective.

Results, outcomes and implications. The presentation asserts that ethics education cannot only decrease the number of ethical violations but also has the potential to create various desirable outcomes, like improving the interaction among all the relevant parties at the clinical level.

Conclusions. Providing healthcare professionals, patients, and patients' families with adequate ethics education can significantly influence the outcomes of the therapeutic relationship. For this reason, ethics consultation services should prioritize ethics education to fulfill ethically acceptable practices among all stakeholders.

Keywords: ethics education; ethics consultation; therapeutic relationship; patients

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An Ubuntu-Based Account of the Obligation to Teach South African Medical Students that neither Sex nor Gender Is Binary

Background. Persons born with variations of sexual characteristics (VSDs), as well as transgender and non-binary persons, have specific healthcare needs. In South Africa (as in many other places), they often struggle to get the healthcare they need; they frequently experience prejudice at the hands of health workers; and some are even subjected to arguably unnecessary treatment without their consent. Many healthcare professionals remain largely ignorant about the lived experiences of these persons, because little training on the healthcare needs of such individuals is provided in health professional education. Entrenched beliefs that both sex and gender are binary reinforce ignorance, a conspiracy of silence and prejudice.

Aim/purpose. This paper sets out to give an Ubuntu-based account of the obligation on those who teach ethics to South African medical students to teach that neither sex nor gender is binary.

Empirical methods and/or theoretical perspective. I rely on an adapted version of Thaddeus Metz's account of Ubuntu, which describes a fundamentally relational ethic, in which our moral obligations are to act in ways that promote harmonious relationships. Harmonious relationships are, in turn, characterised as being constituted by sharing a way of life (identity) and looking out for one another's interests (solidarity). The rationale for using Ubuntu as a theoretical framework is because this indigenous ethic resonates with most South African students, and because it may provide a richer normative understanding of moral obligations to the sex and gender diverse.

Results, outcomes and implications. Firstly, my preferred account of Ubuntu will work to overcome a significant challenge to the notion that neither sex nor gender is binary. It is often claimed that African cultural thought is patriarchal and supports clear binary gender distinctions, and that getting married and having children is a moral requirement. I will argue that these ideas are, in fact, at odds with a harmony-promoting ethic. Secondly, I will argue that at the core of Ubuntu is its commitment to recognizing the common humanity of others; thus, embracing difference. In recognizing the shared humanity of those with VSDs, and those who are non-binary or transgender, Ubuntu drives us to a position of affirmation of those who do not conform to the gender or sexual binary. Thirdly, I will defend the claim that, on the basis of Ubuntu, medical practitioners have an obligation to act in solidarity and with compassion towards those who have variations of sexual characteristics or are non-binary. Finally, the circle of the argument will be closed by defending the thesis that, if the above three claims are true, it follows that Ubuntu entails an obligation to teach South African medical students that neither sex nor gender is binary.

Conclusion. On a harmony-promoting account of Ubuntu, there is an obligation to teach South African medical students that neither sex nor gender is binary.

Keywords: Ubuntu; sex and gender difference; medical ethics; harmony-promoting ethic

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Ethical Competency in Allied Health Professions: Identifying the ‘Wrongs’ to Safeguard the ‘Rights’ in Patients’ Care – A Workshop Proceedings of AHPC-Ghana, 2022

Background. Codes of ethics remain valid indicators for professional identity and a positive framework for professional conduct. Professional core values, on the other hand, are the operational beliefs endorsed by a professional body to dictate directions for their members’ behaviours. Allied Health Professionals (AHPs) contribute immensely to the actualization of comprehensive healthcare service. However, the practice of these professions is bedevilled by avalanche of affronts including shortage of manpower, unfavourable practice environments, healthcare inaccessibility and healthcare costs, particularly in low- and middle-income countries, including Ghana. At the root of these challenges, is a dearth of information regarding ethics and practice integration among AHPs in Ghana. Moreover, most organized continuing professional development training package for the practitioners are often bereft of ethical and cultural competency components. These identified puzzles create a gap in healthcare practice and pose as potential harbingers to ethical compromise. Consideration for regulations and ethical guidance is necessary to ensure professionalism, which is the critical element of healthcare practice.

Aim/purpose. The main aim of the workshop was to identify ethical gaps and suggest solutions to address issues regarding unmet demands for changing conceptual framework in allied health professions, ethical tension, cultural competency, and seeking of informed consent from patients.

Empirical methods and/or theoretical perspective. A 3-day workshop entitled “Ethical Competency in Allied Health Professions: Identifying the ‘wrongs’ to safeguard the ‘Rights’ in patients’ care” was held from November 2 to 4, 2022, under the auspices of the Allied Health Professions-Council-Ghana. Presentations were made on the above subthemes by experts, followed by take-home tasks to stimulate intensive discussions with the participants through structured reflective exercises.

Results, outcomes and implications. The outcome of the discussion led to various ethical and cultural training needs for AHPs on short and long-term basis. Participants in the workshop presented similar experience from their diverse backgrounds. The highpoint of the discussion was the ethical implications of appreciation from patients in the form of ‘Gifts’.

Conclusions. Resolutions were made to develop guidelines on cultural and ethical competency for AHPs, champion research-based practice and allow room for transformative changes to improve healthcare practice for patients.

Keywords: allied health professions; ethical practice; Ghanaian culture

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Comparing Responsible Research and Innovation Teaching in Engineering and Social Sciences

Background. For the past 15 years the European Union has promoted *Responsible Research and Innovation* (RRI) through funding of research and innovation projects performing well in that regard. Often RRIs are understood as a symbiosis of several key elements: ethics, public engagement, open science, governance, gender equity, and science communication as means to encourage researchers' and innovators' reflections on how to orientate their research and innovation towards addressing grand societal challenges. Many RRI projects suggest spreading the RRI message through university education so that graduates can enact and incorporate responsibility in their professional research and innovation activities. However, different countries, different institutions, and different disciplines address the RRI components in multiple ways.

Aim/purpose. This paper explores similarities and differences in how RRI is embedded in study programs of engineering and social sciences in two countries: Denmark and Lithuania.

Empirical methods and/or theoretical perspective. The methodology is based on content analysis of selected graduate courses and on qualitative interviews with different stakeholder groups (teachers, students, university management) in study programs offered by universities in Denmark and Lithuania.

Results, outcomes and implications. The analysis will involve a mapping of how the different six key dimensions are addressed and perceived. Preliminary analysis indicates that engineering study programs are more focused on RRI than study programs in social sciences (political science, sociology, and public administration). However, contextual factors such as socio-cultural environment, science policy, pedagogical approaches, geographical location also have a high influence on institutional adoption of RRI teaching practices. The paper will on that basis discuss how RRI can be strengthened in university teaching while considering local contingencies. The discussion will lead to a few concrete recommendations for university teachers and management on how they can strengthen RRI in their daily activities.

Conclusions. The research is in progress and recommendations/conclusions will be presented at the conference.

Keywords: ethics education; responsible research and innovation; case studies; interdisciplinarity

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Survey of Medical Students' Experiences of the Activities of TOBB University of Economics and Technology International Chair in Bioethics

Background. TOBB University of Economics and Technology (ETU) International Chair in Bioethics was established in 2019. Since then, the unit is organizing roundtable case studies, expert presentations, symposiums, thematic workshops, and World Bioethics Day events.

Aim/purpose. The aim of the study is to evaluate the impact, effectiveness, and efficiency of these activities in terms of methodology, content, and type of organizations and determine the aspects that need improvement.

Empirical methods and/or theoretical perspective. An online survey and two focus group meetings will be conducted on TOBB ETU International Bioethics Student Association member students.

Results, outcomes and implications. The expected results are: the students improved their ability to express themselves through the activities of the Bioethics Unit, learned to be more open to new and different ideas, and give importance to both the educational and social aspects of the ethical discussions held outside the bioethics curriculum and, strengthened sense of belonging to the bioethics filed through these activities.

Conclusions. This study will show that the activities of the Bioethics Unit have increased communication between instructors and students who are interested in ethical issues in medical treatment and research processes. During the activities of the Unit, the students were able to establish similarities with the ethical dilemmas they experienced in clinics and the case studies strengthen their ethical awareness and improve ethical problem-solving abilities. In addition, the students' comprehension of professional ethical and legal responsibilities was developed. Most medical students support the need for educational opportunities in ethics and professionalism to discuss challenges and expectations, with an eye toward practical approaches to their clinical internships where they need to be professionally responsible and personally realistic.

Keywords: bioethics education; International Bioethics Unit; medical students; case studies

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Implementing a Group-Based Active-Learning Approach in Medical Education: An Example of Integrative Ethics and Professionalism in Rehabilitation

Background. Teaching ethics in university courses may benefit from different didactic approaches; nonetheless, it still seems unclear whether ethics teaching can be best offered in stand-alone courses or integrated into other courses, or perhaps both.

Aim/purpose. We describe the experience derived from a structured teaching activity in the field of medical ethics, conducted during a lesson for the students of a rehabilitation university second-cycle degree course.

Empirical methods and/or theoretical perspective. The participating students were healthcare professionals with different graduate training in rehabilitation. The aim of the lesson was to discuss the essentials of the relationship between patients and rehabilitation healthcare providers, from an inter-professional viewpoint, focused on the principles of trust, mutual respect, power and personal closeness, which are essential components of the therapeutic relationship between patients and physical therapists. Shared moral norms guiding the professional conduct of healthcare professionals are a fundamental characteristic of these professions, promoting the public trust in these professions, tearing down barriers to inter-professional collaboration and communication.

Results, outcomes and implications. The main outcomes of our experience are that students demonstrated a positive attitude toward involvement in ethical reasoning and professionalism: this represents a good picture of the knowledge and of the attitudes within this group of university students. The results are remarkable, and there has been very positive feedback from the students concerning the production of the oath and its contents, as well as about the proposed teaching method, resulting in great interest in clinical ethics.

Conclusions. This type of activity could be easily adapted for use by healthcare education programs to assist students in synthesizing their knowledge and developing competency, skills and behaviors in a safe setting that promotes confidence and allows for the exploration of ethical behavior and encouraging ethical conduct in practice.

Keywords: methods of ethics education; inter-professional collaboration; ethics education in (bio)medicine; active learning

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The Presence of Clinical Ethics Consultations within Inpatient Psychiatric Hospitals: An Analysis of Patient Rights and the Need for Psychiatric Ethicists

Background. Clinical ethics consultations are an underutilized yet growing resource in the medical field. Ethics consultation in a healthcare setting is a service provided by an individual, a team, or an ethics committee to resolve ethical concerns or conflicts that arise in the healthcare setting and improve the quality of care. Ethics consultants are typically trained in a broad range of fields, with some specializing in only one or two areas of medicine. Psychiatry is a unique field of medicine with unique ethical challenges and dilemmas. While individual clinical ethics consultants and their teams are fully equipped to handle psychiatric cases, there is a severe need for psychiatric ethicists specializing in the uniqueness of inpatient psychiatric care.

Aim/purpose. The objective is to examine the presence of clinical ethics in three psychiatric hospitals in and around Pittsburgh, followed by a proposed need for psychiatric ethicists in such facilities.

Empirical methods and/or theoretical perspective. An analysis of three Pittsburgh psychiatric facilities was performed. The analysis included patients' rights to ethics consults, the presence of clinical ethicists, and the number of requested ethics consults for each facility in 2022.

Results, outcomes and implications. Results showed that none of the three area psychiatric hospitals had their own clinical ethicist. Only one had a designated team of ethicists, which was shared among two other university hospitals. In this hospital, patients had the right to request an ethics consult, but upon further investigation, ethics consultations were only requested ten times in 2022. The other two hospitals analyzed had no ethicists, but according to the patient's rights, they had the right to an ethics consult if requested. This consult would have to come from an outside ethicist or legal team. These two hospitals' total number of ethics requests for 2022 was three.

Conclusions. In notoriously paternalistic fields, such as psychiatry, one would expect a presence of clinical ethics consultations in psychiatric hospitals; however, these findings suggest that psychiatric facilities have a severe need for clinical ethicists, specifically ethicists specializing in psychiatry. Results also suggest that psychiatric patients and their families must become more familiar with clinical ethics consultations and their rights while hospitalized. With the increase and presence of psychiatric ethicists in inpatient psychiatric facilities, the hope is that patients' rights will be protected and the unique ethical dilemmas that arise in psychiatry be handled ethically.

Keywords: clinical ethics; psychiatric hospitals; psychiatric ethics

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Arne Næss and Deep Ecology in the Context of Ethics Education

Background. This presentation is based on the results of an ethics education lesson “Arne Næss and Deep Ecology”, which was initially presented as a “conceptual lesson preparation” in my MA thesis “The Concept of Environment – An Ecophilosophical and Cognitive-Linguistic Analysis”, and later tested in practice, as part of a Zoom meeting with high school students (i.e., an invited lecture in Dr. Mate Ujević High School in Imotski).

Aim/purpose. The aim of this presentation is to emphasize and additionally clarify certain educational aspects of Arne Næss’ environmental ethics and deep ecology, from which further implications can be drawn both for his philosophy and environmental education in general.

Empirical methods and/or theoretical perspective. The theoretical perspective of this presentation is based on Arne Næss’ philosophy and various interpretations of his environmental ethics and deep ecology.

Results, outcomes and implications. Arne Næss’ philosophy and deep ecology have strong educational implications. For example, some of the educational aspects of his theory include: (1) asking meaningful and deep questions; (2) encouraging self-realization and self-education; (3) developing critical thinking; (4) encouraging the development of one’s own ethical worldview and theory with the help of general principles of deep ecology; and (5) encouraging the development of moral responsibility and compassion towards all living and non-living beings.

Conclusions. Although his research interests were not directly connected with education, Arne Næss’ philosophy and deep ecology have strong educational implications which together can be understood and further interpreted as an ethics education project.

Keywords: Arne Næss; deep ecology; self-realization; ethics education

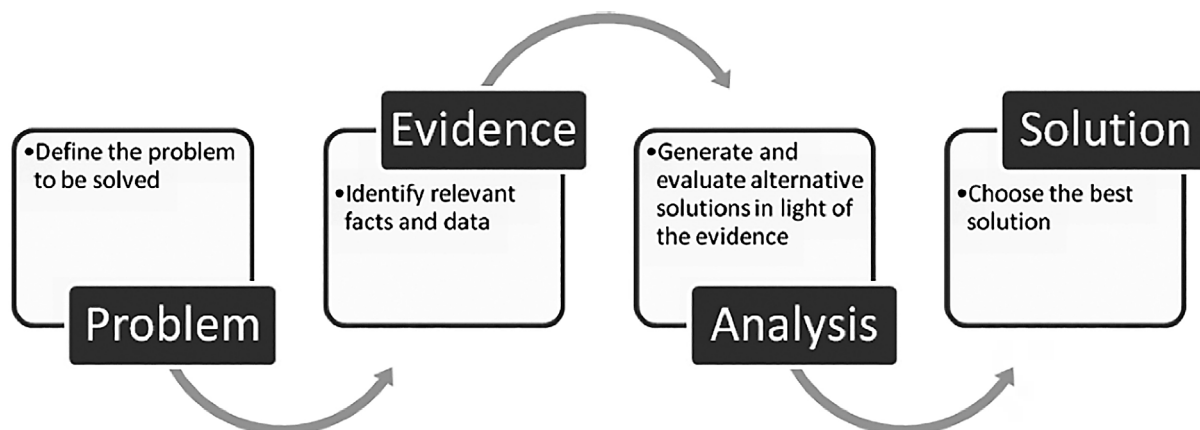
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Interdisciplinary Ethics and Philosophy Teaching in Medical Sciences: How Ethical Reasoning and Clinical Reasoning Should Be Two Peas in a Pod

Background. Ethics education in medical sciences witness from a wide variety in terms of methods. Some universities have a tradition of medical humanities, others limit themselves to introductory courses. At the Ghent University, we opted for an interdisciplinary method: courses on ethics and philosophy of medicine are integrated into a so-called E-line (exploration) in which every year of undergraduate and graduate, a course is dedicated to aspects of clinical reasoning, ethics and medical law. The first two years of the bachelor are more theoretical and introductory, and from third bachelor on, specific topics – end-of-life, pain, pre-natal, etc. – are the starting point for more detailed reflection on ethical issues. This ends up in the last year of the master (GP) in which case analyses are used for a more in depth integration of clinical and ethical reasoning.

Aim/purpose. In my presentation, I will sketch briefly this model and invite the audience for a dialogue on possible other models for interdisciplinary teaching in medical sciences.

Empirical methods and/or theoretical perspective. The PEAS model is used to combine clinical and ethical reasoning, in order to avoid an isolated exercise of ethical reasoning on the one hand and the integration of it within clinical scenery later on.



Results, outcomes and implications. Interdisciplinary case description of ethics education.

Keywords: ethics in medical sciences; PEAS model; ethical reasoning

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Assessing Student Competencies in the Bachelors' Medical Curriculum: A Qualitative Study about the Experiences of Students and Teachers with the OSCE for Ethics, Law, Diversity, and Patient Safety

Background. Assessment of Ethics, Law, Diversity and Patient Safety in the medical curriculum is challenging. An Objective Structured Clinical Examination (OSCE) is implemented in year 3 of the bachelors' curriculum to assess competencies regarding these subjects. The OSCE is not frequently used for these disciplines and literature on this topic is scarce.

Aim/purpose. The aim of this study is to explore the value of the OSCE as an assessment method for these subjects according to teachers and students.

Empirical methods and/or theoretical perspective. A qualitative design was used, consisting of interviews directly after the OSCE, with students and teachers, and focus groups with students and teachers after a couple of weeks. Data was analysed using thematic content analysis.

Results, outcomes and implications. The following themes were identified for students: discussing the case together, examining perspectives, importance of the subjects in clinical practice, the complexity of future practice, speaking up, and insecurity about what to expect. For teachers, the following themes emerged: dialogue with the student, students' perspective-taking and reflection skills, contribution to the relevance of the assessed subjects, preparation for future practice and uncertainty about grading.

Conclusions. The OSCE adds to other ways of assessment of ethics, law, diversity and patient safety. It contributes to students' understanding the complexity of future practice and the relevance of these subjects. Teachers are empowered by students taking the subjects seriously and are provided with valuable feedback about the educational program.

Keywords: Objective Structured Clinical Examination (OSCE); medical ethics education; diversity; health care law

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Medical Assistance in Dying: The Ethicality of Educating Children on Euthanasia through a Canadian Activity Book

Background. Since the birth of bioethics, euthanasia has been at the center of never-ending debates over its ethicality. Regardless of its Greek etymology that means “good death”, conflicts between the patients’ autonomy to decide about their own death and the doctors’ duties to provide care have prevented medical and ethical communities to reach a consensus on whether euthanasia should be permitted. Nevertheless, in Canada, the practice of medically assisting patients in dying has been legalized since 2016. Patients who have been diagnosed with serious diseases or disabilities may meet the requirements to seek medically assisted suicide. As a result of this legalization, medical and ethical communities have expressed concerns regarding those who assist their loved ones in the process of dying.

Aim/purpose. This paper aims to investigate whether a pamphlet written to help children better understand why someone they love may seek death should be considered ethically appropriate as a tool for education on medically assisted suicide.

Empirical methods and/or theoretical perspective. This oral presentation evaluates the importance of educating children about death when someone they love seeks medical assistance in dying through a normative perspective.

Results, outcomes, and implications. Little has been written about how children deal with the decision of a family member to end their life due to unbearable suffering. Therefore, when it comes to children, adults have tried to prevent them from being exposed to such a tragic event. Withholding information about death from infants was believed to be in their best interests as an act of a paternalistic form of protection. An activity book for children first published in July 2022 by the group Canadian Virtual Hospice has hampered this conviction. Although this booklet is not intended for children who seek death for themselves, since euthanasia for minors has not been legalized in Canada, it has been proposed as a tool to help them navigate the traumatic experience of facing death. Clear and easily understandable texts followed by simple and colorful drawings introduce them to the topic of medical assistance in dying. Interactive activities have been designed to drive them through critical thinking about how MAID works, why people may ask for this service, and who can request it. Great consideration has been paid to their feelings and opinions about what it means for them to seek death and how they would like to support such a decision.

Conclusions. Recent studies have shown that children feel the approaching death and learn how to hide their feelings and not to upset adults by bringing up the argument. This paper aims at inquiring whether this activity book can provide a new and helpful approach to drive children through the process of understanding death. If the goal of education is to provide children with lens to read the world in which they live, could this educational tool open up the doors of a new conception of death with dignity in light of the international debate over euthanasia?

Keywords: ethics education; medical assistance in dying; ethical dilemmas in pediatrics; pediatric disclosure

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Online Learning for Ethics Education: A Global Final Exam

Background. COVID-19 pandemic brought a new scene about medical ethics and education. More importantly, education became online and had some positive and negative impacts. We have questioned whether various concerns dominated medical decisions in numerous instances, and eventually, ethics education in medical school had to be questioned.

Aim/purpose. Our aim is to present our unpublished data about online ethics education and education of medical skills in ethics in a medical school in Istanbul, Türkiye, and compare the negative and positive impacts with other findings global wise.

Empirical methods and/or theoretical perspective. In the online courses, we used various techniques and gathered evaluation data about outcomes. Then we did a detailed review about relevant online ethics education techniques and compared outcomes.

Results, outcomes and implications. In our study in Istanbul, we found out that for interactive skills education, applying tools such as videos, role-play, and interactive discussion about films was very efficient. Detailed discussion will be made in our presentation. A study in Nepal showed that after medical students perceived online education introduced after the COVID-19 outbreak as a problematic method with many difficulties, the faculty needed to take additional measures to improve the online teaching quality. It was found out that the student class participation was a factor of the quality of the resources available and the effectiveness of the instructor. Another study presents an examination of restructuring the Fujian Medical University (FJMU) medical ethics course. Innovations in information technology enabled teachers to be able to tackle the boundaries set by time and room capacity. The study further investigates ways of how to utilize the benefits of both online and offline teaching to improve the quality. In another study in pediatric ethics, online learning was identified as superior to in-person teaching. It shows how students assess the online course in terms of its organization and significance for their profession, and how it facilitates their effective participation and reflective thinking. Students have found the online education modern and exciting, which must stay after the pandemic because it compensates for some inadequacies of the traditional education. The study shows that the new teaching method enhanced autonomous learning and involvement in learning while helped students in acquiring clinical skills and sophisticated intellectual abilities. We will discuss other additional outcomes in various settings in our presentation.

Conclusions. In conclusion, students who were actively engaged in our online learning in a medical school in Istanbul perceived this ethics course as highly relevant for their professional practice. Researches around the world presented discussions and suggested improvements that could be applied to address the issues of low student engagement and poor classroom participation. We believe that a well-balanced hybrid education that employs the most beneficial features of both in-person and remote teaching would deliver a more effective learning process for medical ethics education in the future.

Keywords: distance-learning; interactivity; medical students; pediatrics

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The Hermeneutics of Nudging: The Reciprocity between Transhumanism and Nudging

Background. Transhumanism offers a path to alleviate suffering and transcend our physical and mental limitations. Transhumanist technologies consist of things like genetic modification, neural implants, and molecular nanotechnology. Each of these technologies is meant to give people full morphological freedom over their bodies. Although transhumanism remains a largely unknown movement, this is where nudge theory can help raise its prominence. Nudge theory aims to help people make better choices, and aid them in making better decisions related to their health and lifestyle.

Aim/purpose. This paper seeks to investigate and evaluate the implications of nudging someone toward transhumanism. If paired correctly, transhumanism seems to be a perfect option to live a life free of suffering and physical ailments. However, we should be cautious about this union. This partnership would nudge people toward an ideal body that further condemns conditions like physical and mental disabilities. Further, epistemological concerns arise from the perspective of whether a proposed nudge will actually address an individual's true need. Instead, the individual may need psychological counseling or a behavioral change. Transhumanism and nudging raise questions about our obligations to one another. Each of them challenges our deep-seated interdependent nature, in favor of elevating the individual above the community.

Empirical methods and/or theoretical perspective. This paper used primary sources related to transhumanism, nudge theory, epistemology, and virtue ethics. Various scholarly journals were accessed through Ebsco-Host and PubMed.

Results, outcomes and implications. While the partnership of transhumanism and nudging seems promising, we ought to be skeptical of whether the proposed technologies will help individuals reach their true potential, and what they ultimately want for their lives.

Conclusions. We ought to be mindful when nudging someone toward transhumanism. The direction we want to nudge them is loaded with presuppositions and faulty assumptions about how we perceive health and well-being. We ought to consider what nudging someone toward transhumanism says about what we, as a society, value. Nudging someone toward a particular option extends beyond the clinical encounter and signals that certain choices and lifestyles are suboptimal. The nudge itself may rob an individual of the opportunity to undergo self-interpretation so they can understand what they actually value and need in life.

Keywords: transhumanism; nudge; epistemic paternalism

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Investigating the Broad Ethical Dilemmas Faced by Incarcerated Patients in the United States Seeking Healthcare and How to Overcome Them

Background. There are myriad ethical issues that arise when incarcerated individuals in the United States face injury or illness resulting in a need for medical attention. For years, a majority of these ethical issues have been hidden from the public's view due to the nature of the prison system. However, through patient testimonials, legal and journalistic investigations, and a growing body of scholarly work surrounding prisoner healthcare, these issues are beginning to come to light. More specifically, barriers to inpatient medicine, surrogate decision-making complications, problematic standards of care, and operationally difficult procedures, are just some of the issues faced by prisoners in the United States justice system who are in need of healthcare. Nonetheless, a growing awareness of and reckoning with these ethical issues has resulted in possible solutions being proposed. In this presentation we explore those issues and various ways to efficiently overcome the aforementioned problems, with an emphasis on education and dignity.

Aim/purpose. In this presentation, we first point out the myriad flaws within the healthcare systems of United States' prisons, with real world examples used to bolster the legitimacy of our arguments. Then, we suggest logistical and theoretical ways that the system can be changed for the better.

Empirical methods and/or theoretical perspective. We use case examples of ethical dilemmas faced by hospital and prison personnel when incarcerated individuals require healthcare. Doing so allows us to situate theoretical concepts and scenarios in real-life situations, thus exploring the dire need for reform within the U.S. prison system's pursuits of healthcare for incarcerated persons.

Results, outcomes, and implications. The exploration of inefficiencies within pursuits of prisoner healthcare allows us to call out and elaborate on the several problems that arise from such pursuits. Many instances of unethical treatment of incarcerated individuals seeking healthcare are not isolated incidents, but rather representative of pervasive and all too common issues.

Conclusions. By focusing on education and dignity, we can start to fix the broken system that every incarcerated individual faces when they are injured or fall ill. Providing healthcare professionals, prison staff, and the prisoners themselves with the proper knowledge about prisoners' rights and solutions to ethically questionable norms can lay a foundation for a more fair and equitable future for incarcerated patients and their healthcare. Further, recognizing the humanity of those imprisoned and upholding their dignity is an important step in ensuring ethical care for all.

Key words: incarcerated; patients; healthcare; prisoners

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An Integrated Clinical Ethics Curriculum for Medical Students

Background. Various methodologies have been utilized in bioethics education at different levels for diverse populations of students. Medical students, for example, typically respond best to case-based discussions, as well as simulated encounters with patients or family members in which clinical ethics issues arise. They may also be educated about mid-level principles of biomedical ethics – such as respect for autonomy, beneficence, non-maleficence, and justice – and, in rare cases, practical methodologies for engaging in case-based analyses and clinical encounters that require conflict resolution and mediation skills.

Aim/purpose. In this presentation, I describe an integrated clinical ethics curriculum for medical students that was implemented at a U.S.-based osteopathic medical school.

Empirical methods and/or theoretical perspective. This curriculum, which comprises not just a single clinical ethics course but rather integrated learning experiences over the course of the entire four-years of undergraduate (i.e., pre-residency) medical education, is intended to foster students' appreciation for the ubiquitous presence of ethical decision-making no matter their future specialty or the types of cases they will encounter. This curriculum employs a variety of learning modalities, including didactic lectures, panel presentations, small-group case-based discussions, simulated clinical encounters with patients or family members, reflective journaling, online training modules (CITI), and even critical analyses of how medicine and medical ethics issues are portrayed in popular culture.

Results, outcomes and implications. Particular examples that will be highlighted in this presentation include a series of lectures by a neuroscientist, a neurologist, and an ethicist regarding the determination of death by neurological criteria, followed by a simulated clinical encounter; panels on diverse religious worldviews on medicine and spirituality, as well as the experiences of LGBT+ patients, also augmented by simulated encounters; and specific examples of how televised medical dramas may distort the public's perception of medicine and medical ethics. The curriculum also includes an elective course in which students have the opportunity to shadow a clinical ethics consultancy, round with a palliative care team, and attend institutional review board meetings.

Conclusions. This presentation will conclude by affirming the value of an integrated ethics curriculum throughout all four years of medical school and the use of diverse learning modalities.

Keywords: medical education; clinical ethics curriculum; case-based analysis; simulation

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Contribution of Philosophical Methodology to Bioethics Education

Background. Various methodologies have been utilized in bioethics education at different levels for diverse populations of students. Medical students, for example, typically respond best to case-based discussions, as well as simulated encounters with patients or family members in which clinical ethics issues arise. Masters-level students and post-doctoral fellows in clinical ethics are often educated about mid-level principles of biomedical ethics – such as respect for autonomy, beneficence, nonmaleficence, and justice – and practical methodologies for engaging in case-based analyses and clinical encounters that require conflict resolution and mediation skills.

Aim/purpose. In this presentation, I demonstrate the value of utilizing foundational philosophical methodology at both the lowest (undergraduate) and highest (doctoral) levels of bioethics education.

Empirical methods and/or theoretical perspective. While bioethics is an inherently interdisciplinary field, requiring multiple pedagogical methodologies to be utilized at all levels, it is particularly important for students being initially exposed to the relevant issues to have learned the fundamental philosophical skills of critical thinking, argument analysis, and concept formulation. At the advanced level, students should be able to engage in meta-level analyses of, for instance, the mid-level principles that inform standard biomedical ethics practice, as well as metaphysical views regarding such concepts as personhood, free will, and vulnerability that underwrite both secular and religious worldviews. Such metaphysically-informed worldviews are operative – consciously or not – in both patient and familial decision-making, as well as attitudes exhibited by health care professionals and recommendations of clinical ethics consultants. As a result, doctorally-educated bioethics scholars, who will not only enter into professional clinical practice, but also engage in academic debates regarding the nature and function of the profession itself, require the appropriate formation to proffer constructive meta-level critiques.

Results, outcomes and implications. Among the particular issues highlighted in this presentation in which the value of the use of philosophical methodology comes to the fore include the definition of death for human beings, the phenomenology of embodiment in relation to disability, and the ontology of technology with respect to both therapeutic and enhancement uses.

Conclusions. The presentation will conclude with curricular proposals at both undergraduate and graduate levels that evince interdisciplinarity with a particular emphasis on philosophical education.

Keywords: philosophy; bioethics; metaethics; metaphysics

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The Inclusion of Bioethics Teaching When Implementing the Practice of Disclosure in Healthcare for the Elderly in Brazil

Background. The practice of disclosure is understood as an exercise in honest communication with patients and their families about incidents that may result in harm, caused during healthcare; it is the subject of debate in the contemporary context of studies on patient safety. One of the purposes is to include the participation of the patient who suffered harm and the opportunity to repair it, with the final purpose of conciliation between those involved. The elderly population is more likely to suffer the greatest consequences of the absence of this disclosure practice or its inappropriate implementation. Often, the elderly do not feel involved in their care process, especially when organizational conditions put pressure on the work situation, prioritizing care as merely an additional activity for the health team, to the detriment of patient involvement. In Brazil, there are still no regulations or specific guidelines aimed at the practice of disclosure in the healthcare of the elderly; in the same way, health institutions do not prepare their professionals to inform the elderly and their families about the occurrence of injuries in a suitable way. The lack of definition of educational objectives and methods to work on this subject through health education is identified.

Aim/purpose. To discuss the practice of disclosure, with the debate on the respect for elderly health care, to implement educational models in higher education in Brazil, including their families in the training of health professionals.

Empirical methods and/or theoretical perspective. This was a narrative review, which was based on references, guidelines and regulatory documents published by the World Health Organization, the Brazilian Ministry of Health, the National Health Surveillance Agency and UNESCO documents. The search for bibliographic references was carried out through the Google Scholar platform, using the following keywords: disclosure; damage; patient safety; health care; elderly people; bioethics teaching. The keywords were used in Portuguese, English and Spanish. Due to the high number of publications that the Google Scholar database offers, references were excluded if they did not specifically deal with disclosure applied to health care practice.

Results, outcomes and implications. In Brazil, the practice of disclosure from the exclusive perspective of bioethics is not included in health education. With rare exceptions, health institutions in Brazil do not prepare their professionals to inform patients and their families appropriately, regarding the occurrence of harm. There is, therefore, a need for a cultural change that facilitates and improves communication in order to establish trust in the professional relationship with elderly patients and their families. Health professionals should consider establishing safety culture for patients, based on recognition of potential harm or harm caused.

Conclusions. Disclosure is a practice that serves the purpose of promoting patient safety. However, the implementation of this practice cannot occur unilaterally only on the part of health professionals, as their sole and exclusive responsibility. It is necessary to promote an appropriate organizational structure in health institutions in order to facilitate communication between the health team, the elderly and their families, through protocols based on bioethical precepts. The most appropriate path would be for health institutions in Brazil to promote and demonstrate the ability and willingness to learn from harm, disseminating suitable information and bringing relevant contributions to quality health care, with a focus on the safety of elderly patients.

Keywords: disclosure; elderly; health professionals; teaching bioethics

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Narrative Deliberation: A Model for Ethics Education

Background. This communication is part of the research project entitled “Bioethics education and democratic deliberation”, led by Lydia Feito and funded by the Spanish Ministry of Science and Innovation. This project brings together bioethics experts from different disciplines and countries, with experience in bioethics education. This interdisciplinary group with a diversity of perspectives is working on the analysis of bioethics education models with the hypothesis that the deliberative approach is the most suitable, not only for the training of health professionals but also for the training of citizens in complex democratic societies.

Aim/purpose. Our purpose in this paper is to present a model of deliberation suitable for ethics education. We rely on the deliberative model proposed by an internationally known Spanish bioethicist: Diego Gracia.

Empirical methods and/or theoretical perspective. This deliberative model emphasizes working with values as fundamental elements that represent diverse perspectives, beliefs and positions on an ethical problem. Recovering the Aristotelian tradition, this method, initially designed for the healthcare environment, seeks an articulation of the different values in conflict without establishing hierarchies among them. The aim is to find a prudential course of action that takes into account the different views and whose consequences can be assumed by the decision-makers. This method is not only a tool but also promotes a change in attitudes, encouraging a prudential and responsible approach to dealing with conflicts. This avoids dogmatic positions and reductionist visions, understanding the complexity and nuances of decision making. For this reason, this method has enormous educational potential. The originality of our proposal lies in introducing a narrative element in this deliberative method. Narrative means taking into consideration the contexts that give meaning to the problems, the experiences of the people involved in them, the perspectives from which the facts can be interpreted, etc. This is important because ethics education does not refer exclusively to rational and strategic issues, but also to emotions, beliefs and worldviews.

Results, outcomes and implications. Narrative deliberation is thus shown to be a useful model for decision making and also for the promotion of attitudes important for ethics such as tolerance, respect, eagerness to understand and awareness of the incompleteness of partial visions. This promotes important values for the training of health professionals and provides them with a more far-reaching method for the resolution of ethical conflicts. But it also makes it possible to achieve a more ambitious objective of shaping a moral identity that is configured in relation to other people in an open and critical way. The work of narrative imagination is shown to be essential and indispensable for the formation of autonomous and caring citizens. This is an impulse for contemporary multicultural and plural democratic societies.

Conclusion. Narrative deliberation is thus an excellent approach to ethical education.

Keywords: deliberation; ethics education; narrative

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Quasi-Expressivism and the Language of Mental Disorder Attribution

Background. Wilkinson (2020) has recently introduced an “expressivist” view of delusion-attributing statements: when someone says that ‘X is delusional’, she is not describing how X fails to satisfy certain epistemic criteria so much as she is *evaluating* X’s mental state and *expressing* her non-cognitive attitude towards X’s beliefs. This view, Wilkinson claims, better explains what such statements typically mean and also better accounts for the existence of substantive disagreement between experts over what *counts* as delusional.

Aim/purpose. The aim of this paper is to argue that despite its merits, Wilkinson’s view encounters two difficulties: first, it cannot explain why delusion-attributing statements *do* seem to *describe* mental states that strike experts as objective matters of fact worthy of scientific pathological inquiry, and second, it overlooks the normative character of such statements, i.e. implicit prescriptions that X *ought to* believe something else or behave in accordance with certain mental health standards.

Empirical methods and/or theoretical perspective. Alternatively, I adopt the theoretical perspective of a *quasi*-expressivist view of delusion-attributing statements that overcomes these difficulties but does so in virtue of their *pragmatics* rather than *semantics*. More precisely, I explain their practical features in terms of the end-relational connection between the psychiatric evaluation made by their speaker and their motivational attitude – why, for example, judging that X ought to ϕ leads to X’s being rationally motivated to ϕ . I also argue that such statements carry Gricean implicatures to the effect that the speaker endorses certain epistemic norms which they invite their audience (including their patient X) to share.

Results, outcomes and implications. I hope to show how the result of this inquiry better elucidates the meta-ethical and normative dimensions of delusion-attributing language, which, in turn, allows us to re-think how we ought to communicate with potentially delusional individuals.

Conclusions. I conclude by generalizing my argument to apply to similar psychiatric disorder attribution (e.g. ‘X is bipolar’, ‘X is manic-depressive’, etc.) and discussing its ethical implications upon mental health discourse in general as well as mental health practitioners’ responsibility to treat their patients with kindness, understanding, and compassion.

Keywords: metaethics; quasi-expressivism; Gricean implicatures; delusion-attributing statements

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Ethical Mnemonics: Surrogate Decision-Makers and the “Best Interests” Standard

Background. When a patient’s individual preferences are unknown, the default approach relies on a surrogate to act in the patient’s “best interest.” For the patient, the stakes are very high. For the surrogate, subjectivity and moral dilemmas can be overwhelming. The thoughtfulness, thoroughness, content, and motivations for surrogates’ decisions can be difficult to determine and evaluate.

Aim/purpose. To design an instrument offering surrogate decision-makers a comprehensible, culturally versatile foundation for ethically oriented “best interest” decisions.

Empirical methods and/or theoretical perspective. *Theoretical perspective.* Ethics education is needed by laypersons in everyday settings beyond physical or virtual classrooms and without didactic techniques. “Soft” instruction in ethics can be valuable when surrogates unfamiliar with formal language and ethical principles are catapulted into making decisions which have “supercharged” ethical implications. “Ethical mnemonics” offers surrogates a method for organizing and articulating their decisions. As a self-education observational tool, the instrument offers surrogates an opportunity to examine and “process” their own deliberations, elevating their awareness. *Empirical Methods.* This is an observational study. By means of a simple acronym “CARES”, a constellation of decisional elements will be presented. Using ordinary, accessible language, each letter of “CARES” enunciates two factors with embedded ethical principles: Surrogates will be given an instrument using two words beginning with each letter of the word “CARES.” Each word refers to a pragmatic factor in determining the patient’s condition, options, and interests. In most instances, these practical factors are linked to one or more underlying ethical principles (in parentheses below.) Using a 3-point scale, the surrogate is asked whether s/he considers a factor to be “very important,” “somewhat important,” or “less important.” – The following list is an extremely abbreviated version of this “ethical mnemonic”: C = Caregiving (Vulnerability), Costs (Justice), A = Abilities, Attitude (Autonomy), R = Relationships (Relational Autonomy, Identity), Residence, E = Expertise (Beneficence – is there sufficient expert medical evaluation), Expectations, S = Self (the patient’s identity, dignity and integrity), Self-interest (the surrogate’s involvement). Surrogates will be advised to consider each element and asked to indicate the weight they accord each factor, using a 3-point scale. The surrogates’ results are not judged or graded, nor does the instrument present an algorithm or a formula. Records of surrogates’ decisions will be collected and analyzed.

Results, outcomes and implications. It is premature to predict results or outcomes. Nevertheless, observing how surrogates arrive at “best interest” decisions will offer insight to ethicists and ethics committees and inform our ability to engage in culturally attuned and effective communication.

Conclusions. To be determined.

Keywords: everyday situations; ethical reflection; pluriperspective

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Is There a Need for Specific Ethics Education in the Context of the Management of Chronic Conditions?

Background. Chronic diseases range from cardiovascular diseases, tumors, gastric or intestinal diseases, neurological, musculoskeletal, mental health issues and so on. They are rising in all parts of the world, representing the number one cause of death today. Their increase is connected with the longevity of a contemporary society, ageing population and lifestyle-related risk factors. Nevertheless, they are not exclusively illnesses of the elderly population; a rising number of adolescents and young adults are diagnosed with one or more chronic diseases. With age, the prevalence of multiple chronic conditions is increasing. Most chronic illnesses are not cured completely; however, they are also not terminal, meaning they will accompany the person for the rest of their life. The characteristics of chronic diseases also determine numerous aspects of medical care, which becomes continuously necessary for many years without the prospect of final healing. Such a situation creates a specific relationship between the doctor and the patient, and the patient and the medical staff. According to different studies, chronic patients report a lack of information from healthcare professionals about their condition, social stigma, and how getting a certain diagnosis can dramatically change one's life on an existential level. Some patients shared how dealing with their symptoms in social situations can provoke shame and humiliation and the numerous adaptations they need to make in different social situations. The negative impact on psychological and social well-being was also reported. These concerns also open numerous ethical challenges.

Aim/purpose. This proposal wants to examine the question of the relevance of specific ethics education regarding chronic conditions.

Empirical methods and/or theoretical perspective. Two main research questions are who should be offered this education and who should provide it? The first question opens the discussion whether this ethics education should be exclusively for the physicians who work with chronic patients or include the broader area of healthcare workers; and finally, should it be also for the patients themselves and society? It is striking to notice that evidence of incomplete patient education can be seen everywhere: in the hospital discharge, in emergency rooms, and regarding persons with chronic diseases needing to self-manage their disease control regimen and make lifestyle changes. As mentioned, chronic conditions affect all areas of one's life, and the ethical challenges are not limited to the healthcare environment. An equally significant aspect/question refers to the protagonists of this ethical education. Who should provide such education? Should that be the physicians, bio-ethicists, and nurses? Should patients be involved in the provision of this ethics education?

Conclusions. Chronic conditions are one of the world's most spread pandemics with enormous influence on healthcare provision, doctor-patient relationships, and everyday life; they cannot be neglected in ethical discussions and education.

Keywords: chronic disease; disease management; ethics education

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Ethical Education in the Croatian Elementary Schools

Background. Despite the presence of ethical topics in gymnasiums (through the subjects of Ethics and Philosophy) and in vocational schools (through the subject of Ethics), in the Croatian elementary schools, until now there has been no such subject. In secondary school system, Ethics and Religious Education are two “elective-compulsory subjects”, meaning that the students must choose to attend one of the two. However, in elementary education there has been no such choice. Students could attend only Religious Education or they are “free” at that time. Although in 2019 in Croatian elementary and secondary schools started *Comprehensive Curriculum Reform*, nothing happened on this matter. Despite the fact that most of the Croatian students mainly attend Religious Education, there is a large group of students who do not have an alternative subject. In such circumstances, public made, and still is making, a pressure on the Croatian government and Ministry of Science and Education to assure an alternative for such students. Finally, in 2022 Ministry of Science and Education formed an expert group which had a task to create a curriculum of that alternative subject. There were many versions and titles of it (e.g. “Critical Thinking” or “Ethics for Kids”), but after public discussion, the subject was named *World and Me*. Currently, it is planned to start with the new subject in school year 2023/2024. In the first phase, it will be performed experimentally in all grades (from 1st to 8th grade) in 50 chosen elementary schools. In the second phase, it is going to be a compulsory alternative subject to Religious Education. As the time for implementation is short and not all has been defined by Ministry of Science and Education, there is a big challenge regarding production of textbooks and other written material, as well as their quality. Some of the publishers that act on the market are working on new materials but are in great time crunch regarding the fact that Ministry of Science and Education has to approve those materials and all of this should happen in the spring of 2023.

Aim/purpose. The purpose of this presentation is to show why ethical education is necessary in the Croatian elementary schools. The central place of the presentation is dedicated to the aims and ethical contents in the curriculum of the new school subject called *World and Me*. We will also try to critically and comparatively analyse the textbooks that are at this moment in a phase of developing, enabled by the fact that the author of this paper is a co-author of the textbooks for grades 5–8 (publisher: Školska knjiga, Zagreb).

Empirical methods and/or theoretical perspective. Adoption of curriculum of the school subject *World and Me* is part of a national reform of the elementary and secondary education system in Croatia known as the *Comprehensive Curriculum Reform*, which began in 2015. The curriculum of this subject was not considered as needed until 2022. In 2022 Ministry of Science and Education formed an expert group which created this curriculum in a period shorter than one year. The paper tries to carry out a maximally objective analysis of this curriculum and its aims with an accent on its ethical aspects.

Results, outcomes and implications. Although the teaching of ethics in the Croatian secondary education has a long tradition and has always been based on solid curricula and textbooks, within the *Comprehensive Curriculum Reform* the need to change the approach to teaching ethics was realized. Elementary education is significantly late in achieving that goal and changes are necessary, so the curriculum of a new subject called *World and Me* is a good way towards that goal. What it will really look like, what problems will students and teachers have to deal with in the implementation of that curriculum and how ethical topics would be presented to students, we still cannot answer. It is necessary to wait at least a few years of implementation of this curriculum in order to reach a conclusion about the success of its implementation, but one thing is certain: students and teachers, as well as parents, are looking forward to it.

Conclusions. Curriculum of the new subject for students who do not attend Religious Education in the Croatian elementary schools is a great start to introduce students with great deal of ethical topics. Since it is only at the beginning, it could bring a lot of problems such as: who will teach it and what is educational background of the teachers, how will they perform it, how the classes will be organized, and finally, what will be the quality of related textbooks.

Keywords: ethics; new subject in elementary schools; Croatian elementary school curriculum of the school subject *World and Me*; critical and moral thinking

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Perspective Taking as an Approach to Increase Students' Moral Sensitivity

Background. Ethics education for non-ethicists generally focuses on teaching students the competencies necessary for making ethical decisions. A competency described in this context is moral sensitivity, the ability to recognize which moral aspects are relevant in a situation. We argue that the development of moral sensitivity can be fostered through teaching strategies that tap into students' moral imagination. Moral imagination can be described as the use of products of our imagination to look at a situation from a moral point of view. One of the merits of moral imagination involves the ability to explore the situation from the perspectives of others. Broadening the interpretation of a situation by including the perspectives of others can lead to the recognition of additional moral aspects that are relevant in a situation, and therefore can increase moral sensitivity.

Aim/purpose. In our contribution we will present a theoretical framework on how teaching strategies that tap moral imagination can complement the development of moral sensitivity skills. Furthermore, we will complement this theoretical framework with the results of an empirical study in which we analyzed the effect of a perspective-taking exercise on moral sensitivity using the previously validated Test for Ethical Sensitivity in Science – TESS (cf. Clarkeburn H. A. Test for Ethical Sensitivity in Science. *J Moral Educ.* 2002;31(4):439–453; Fowler SR, Zeidler DL, Sadler TD. Moral Sensitivity in the Context of Socioscientific Issues in High School Science Students. *Int J Sci Educ.* 2009;31(2):279–296.). When performing the TESS students are required to respond to a scenario in which a biomedical innovation is described.

Empirical methods and/or theoretical perspective. For this study, 118 students in a biomedical sciences bachelor program were divided into three groups. The first group was instructed to take the perspectives of all stakeholders they deemed relevant while analyzing the scenario. The second group was instructed to take the perspective of a single specified stakeholder relevant to the scenario. The final group performed the original TESS without any additional instruction. The responses were scored on the number of moral aspects students recognize and the maturity of consideration.

Results, outcomes and implications. Our results show that instructing students to take the perspectives of all stakeholders does not significantly increase their moral sensitivity as scored in the TESS. Students instructed to focus on a single perspective scored significantly lower on the TESS. When looking at the number of stakeholders the students explicitly mention in the different versions of the TESS, we observe a moderate positive correlation between the number of stakeholders mentioned and the TESS scores. This suggests that some students consider the perspectives of multiple stakeholders even when not explicitly instructed to do so. Preliminary qualitative analysis shows that students scoring higher give more mature responses in which they weigh the consequences of the innovation considering the outcomes for different stakeholders. Students scoring lower more often respond with concerns that consider the scientific process of the scenario.

Conclusions. We argue that education that aims to develop moral sensitivity can benefit from activating students' moral imagination to consider the perspectives of different stakeholders involved. In this process students should be stimulated to recognize all relevant stakeholders affected by the situation. Additionally, students should be stimulated to consider not only the scientific process but also the broader societal implications biomedical innovations raise.

Keywords: moral sensitivity; moral imagination; perspective-taking

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Preferences for Ethics Education: The Views of Members of the Indian Association of Palliative Care

Background. Ethical issues occur everywhere in healthcare. In palliative care, the confrontation with pain, suffering, and death can lead to ethical issues that are particularly fraught. In palliative care in India, common ethical issues are scarcity of resources, conflicts between doctors, family members and patients about treatment, and the family hiding diagnosis and prognosis from patients. Unfortunately, healthcare professionals in India, including those working in palliative care, may not feel well prepared to address difficult ethical issues in pain and symptom management and at the end of life.

Aim/purpose. This survey intended to evaluate what kind of ethics education members of the Indian Association of Palliative Care (IAPC) had had and what their attitudes to ethics and ethics education in relation to palliative care were.

Empirical methods and/or theoretical perspective. This study used a non-experimental cross-sectional survey design. In November/December 2022, all IAPC members were invited by e-mail to complete an online Qualtrics survey with 16 open-ended and closed-ended questions on ethics and ethics education. At the end of the survey, participants were requested to list up to three topics that they would like the IAPC to address in future ethics education. Open-ended questions were analyzed using traditional content analysis.

Results, outcomes and implications. E-mails were sent to 1359 e-mail addresses of IAPC members. 87 members (6.4%) submitted completed surveys. 99% of participants agreed that ethics education is “important” or “very important” for people working in palliative care and 67% frequently encountered ethical issues in their work in palliative care. Nevertheless, 37% had had no ethics education. Among those who had had ethics education, the median estimated number of hours was 6.60% felt at least comfortable with dealing with ethical issues in palliative care, implying that 40% felt less than comfortable. 97% wanted palliative care programs and organizations to offer more ethics education and 96% would be interested in enrolling for ethics education if it were offered by the IAPC. Main topics that the participants thought needed to be covered in future training are decision-making, forgoing treatment, the four principles and approaches to ethics case analysis. The content analysis indicated that IAPC members want ethics education to be case-based and practical so that it will help them to more effectively address the ethical issues they are facing in clinical practice.

Conclusions. The results show that IAPC members are sensitive to ethical issues in palliative care. Yet, the low medium number of hours of ethics education as well as the fact that only 60% felt comfortable dealing with ethical issues indicates that the IAPC needs to further build its capacity in ethics education. In its ethics educational offerings, the IAPC should be responsive to the needs of its members for education that trains them to analyze and develop recommendations for the contextual, culture specific ethics issues they are facing in day-to-day clinical practice. Similar surveys on ethics education by other palliative care associations elsewhere in the world could help to shed further light on how the views from IAPC members are unique.

Keywords: palliative care; India; attitudes; ethics education

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Vulnerability and the COVID-19 Pandemic: Educating to a New Notion of Health

Background. In recent years, the concept of vulnerability has emerged in bioethical reflection and in international charters, initially in relation to scientific research and to specific groups of people identified as vulnerable, and then increasingly expanding to assume the status of a true principle. In particular, these reflections and documents have started to erode the primacy of the autonomous and self-sufficient individual of the mainstream bioethics, who has shaped the very concept of health over time. Indeed, the well-known WHO definition describing health as a state of “complete physical, mental and social well-being” reflects this approach and regards vulnerability as an obstacle to be removed representing a lack of autonomy. The COVID-19 pandemic has emphasized that vulnerability is both a universal condition and a special state dependent on social and economic causes, making the traditional concept of health inadequate to provide answers in the health care field.

Aim/purpose. The aim of the work is to examine how the COVID-19 pandemic has challenged the “well-being” conception of health, and the impact on healthcare and on healthcare workers of the assumption of a definition of health based on vulnerability, arriving to a new notion of it.

Empirical methods and/or theoretical perspective. In the research, the method used is not empirical but theoretical, through mainly studies in the area of global bioethics, ethics of the COVID-19 pandemic and philosophy.

Results, outcomes and implications. The pandemic has highlighted the urgency and the opportunity of promoting a new notion of health, depending on the concept of vulnerability. Indeed, the connection between health and vulnerability has some practical implications. On the one hand, it can lead to define different criteria for prioritizing care, which should give precedence to the most dis-advantaged. On the other hand, it can shift the focus to the vulnerability of health care workers, who have always been considered almost “immune” from it, with the effect of obscuring the dimension of reciprocity in the caring relationship. Education and training of health professionals to increase the awareness of their vulnerabilities can play a key role in enhancing resilience, and in discovering the generative potential of vulnerability in the care relationship.

Conclusions. The COVID-19 pandemic has made a contribution in the process already began of rethinking health in the light of vulnerability, by bringing out the notion of “relational health”, and stressing the need to educate to a new approach. Above all, the experience of pandemic may give a push to enhance the training of health personnel in the direction of integrating vulnerability into the personal and professional experience with relevant outcomes in the wellbeing of all the subjects involved in the relation of care.

Keywords: vulnerability; COVID-19 pandemic; health; education

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Protective Factors against Burnout in International Medical Students

Background. Burnout among students can be characterized as a general state of exhaustion followed by a cynical devaluation of their studies and doubtfulness of their ability to perform them correctly.

Aim/purpose. This study aimed to investigate whether medical professionalism, social and emotional support have a protective role in students at risk of burnout.

Empirical methods and/or theoretical perspective. A cross-sectional study was performed at the School of Medicine of the University of Zagreb on students enrolled in the English-language medical program, which includes international students. The general version of the Maslach Burnout Inventory (MBI-GS) was used as a dependent variable, while Jefferson Scales of empathy, teamwork, and physician lifelong learning and the Social and Emotional Loneliness Scale for Adults were used as predictive variables. In addition, information related to sex, country of birth, native language, age, academic achievement, and living situation were collected in a socio-demographic form. Linear regression models were applied to identify predictors of burnout.

Results, outcomes and implications. In a sample of 188 medical students (38 Croatians and 144 foreigners from 28 countries), 18% of the global score in the MBI-GS was explained by lifelong learning and family loneliness. A separate analysis for each of the three domains of the MBI-GS allowed the creation of the following models. The first model explained 19% of the variance of the “exhaustion” domain by “country of birth”, “living with parents”, “academic year”, and “cynicism”. The second model explained 24% of the variance of the “cynicism” domain by “academic year”, “empathy”, “lifelong learning”, and “exhaustion”. Finally, the third model explained 24% of the variance of the “professional efficacy” domain by “lifelong learning”, “family loneliness”, and “cynicism”. All obtained models presented an effect size between medium and large, and matched the required conditions for statistical inference.

Conclusions. These findings provided insight into the international students’ stress due to separation from their family support. They confirmed the important protective role of family support for medical students as well as defining empathy and lifelong learning, two specific elements of medical professionalism, as protective factors in preventing burnout in international students. In order to minimize and prevent students’ burnout as well as ensure adequate professional development during their academic period, interventions could be implemented during studies focusing on fostering these attributes and skills.

Keywords: international medical students; burnout

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What Is a Reasonably Interdisciplinary Work? An Analysis and Some Examples Borrowed from Ethical Research and the History of Philosophy

Background. On the one hand, rationalism is triumphant and champions scientific reductionism or the analytic method in philosophy. The “strange postmodern bubbles” are seen as contra productive postures. (See Alan Sokal and Jean Bricmont’s seminal work, the so-called analytic/continental controversy in philosophy.) The central argument of the critiques of postmodern culture is that poetry-and-history based science is undermining equal access to knowledge, opening up to irrational tendencies. The education systems run the dangers of losing dedicated activism as social progress is left passive, as progress needs industrial technic and science not poetry or history. On the other hand, interdisciplinary work, which can be defined both as an attempt to overcome narrow analytic science by the dialogue across disciplines, can also be defined as an “enlarged reason-based methods of learning”. Historically and geographically diverse optics and needs mirror the divide between richer and poorer parts of the world. Is interdisciplinary work helping the education sector in opening itself and understanding its core value, because humanistic ideal is rooted in traditions and conceived as enlightened by reason? Should we not on the contrary encourage a minimalistic reason-based project, as a more honest way of doing research by concentrating the attention on a narrower but also clearer path? If we do so, we need to remain pluralistic, tolerant, ethical, inclusive...

Aim/purpose. By first doing a semantic analysis of the words around what interdisciplinary education might denote, we try to keep a generous interdisciplinary exposure to research in philosophy. Indeed, contrary to the ordinary use of the words, it seems reasonable to think that many comparative approaches are not interdisciplinary work at all. Solutions to the problem of historicity (not only as non-creative submission to the tradition but widely) is opening the question of the value of history for science and philosophy.

Empirical methods and/or theoretical perspective. After a short semantic analysis of the discourse, we propose to break down a research into a list of different categories of knowledge behaviours. These are epistemic reason (reasons to know something better by questioning the methods). We engage actions across disciplines because empirical and analytical views and approaches are very different. Deep spiritual and religious reasons to find, cross-disciplinary paths, ways to address the idea of a responsible institution are ethical reasons.

Results, outcomes and implications. In proposing to complement reason-based explanations by poetry, philosophy remains concerned by the sphere of the existence, not only of the thinking and of social organisation of this former. It has to do with the ability of opening the mind of the reader to more intuitive modes of understanding across disciplines. Historic and systematic views across cultures are far from a postmodernist imposture. Language and cultural dimensions and views are based on comparisons from different geographical and or cultural perspectives, but they hardly qualify for being always across/inter disciplinary. As useful spaces of creative or intellectual engagement, they open critical engagement, are part of works of memory, conflict transformation, etc. Opening new spaces of comprehension and mediation across cultures is not interdisciplinary. By comparing on the level of the poetic and rhetorical creation across disciplines, across languages and cultures, we contribute to overcome the narrow limits of one precise context and tradition, which is part of *Bildung* or the formation to be human persons.

Conclusions. Intercultural dialogue, interreligious and comparative religious views are, as new anthropological grounds, invented or rediscovered after being forgotten. They are not directly related to positivist scientific views, but keep historical and ethical values as sustaining values across time, precisely because they open to dialogue. Sociology, psychology have been founded in the 19th century although ancient philosophy of medicine is among the venerable traditions in empirical ethics. Psychiatry, criminal anthropology, linguistics: all have a long history across disciplines and in philosophy. Normative and applied ethics are attached to theology, law, and natural sciences, but they have been successively detached from the same over time. By integrating both systematic and historical aspects in research and teaching in good proportions, comparative/descriptive realities seem interdisciplinary, because the words and expressions are borrowed from different backgrounds. These methods are visible in philosophy.

Keywords: reason-based education; philosophy; semantic and epistemic analysis; interdisciplinary education

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Modelling Character Development and Integrity through Competitive Tensegrity in Sport

Background. Sport, besides its obvious physical activity dimension, is often regarded as a vehicle for moral development and, as such, a perfect – though slippery – playground of virtues and vices. We will present a case study on how to include the essential and existential domains prior to ethical reflection in sport in order to provide a model for personal growth, moral growth in particular.

Aim/purpose. The aim of this paper is to outline and leverage such modelling from a pedagogical point of view and to further develop the applied understanding of ethical pluralism and its use in school physical education and other youth sports activities.

Empirical methods and/or theoretical perspective. The model that is visually based on the geometry and understanding of the enneagram is convenient to provide a scheme for both domains and to instruct the subject according to its ethical dilemma or moral challenge. Enneagram itself will serve us also as a tool for creative non-linear thinking. The necessary tension between virtues and vices that exists in any given sport activity, particularly competitive ones, can be interpreted as tensegrity in the enneagram and as integrity from a moral standpoint. In geometry, an enneagram is a nine-pointed plane figure that we will use to graphically show the complexity of the essential and existential domains of personal integrity in sport.

Results, outcomes and implications. Besides the moral point of view, the enneagram tacitly invites the subject to think in a non-linear, rather lateral, and divergent way in order to come to the solution or understanding of the problem. As such, it is a great design thinking tool placed in an emotionally charged sports-based moral challenge, where its potential can be exercised to its full potential.

Conclusions. Once the visualization of integrity can be comprehended as the tensegrity of the geometrical form, the moral subject, the person playing sport, has an opportunity to realize the necessity of moral drama or challenge from an educational perspective.

Keywords: character development; sport; integrity; virtues

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Evaluating Empowerment towards Responsible Conduct of Research in a Small Private Online Course

Background. Over the past decades, the importance of teaching students and researchers how to conduct research in a responsible manner has increasingly been recognized. Organizations like the National Academy of Sciences (NAS) in the US and more recently also All European Academies (ALLEA) stress that RCR education programs should be common in universities. Nevertheless, disparate perspectives on RCR education result in a multitude of existing educational practices, varying in content, format and goals, and it is unclear what kind of approach is most effective. As part of two European projects on research integrity education, we have developed an empowerment perspective on Responsible Conduct of Research (RCR) education and translated this in an online course design.

Aim/purpose. This paper presents the design and qualitative evaluation of a Small Private Online Course (SPOC) that aims to empower PhD-students towards RCR.

Empirical methods and/or theoretical perspective. We used qualitative methods to collect data in three different ways: (a) we analysed the results of course assignments; (b) we used course evaluation questions (Likert scale and open questions) and we held interviews with participants after finishing the course. We analysed the data using rubrics (for the assignments), statistical analysis and open axial coding.

Results, outcomes and implications. The findings suggest that the course helped participants to stimulate individual aspects of empowerment, i.e. awareness, knowledge, reflections, courage and motivation to handle integrity issues. It proved more difficult to empower participants on social aspects of research integrity in the course and to promote transfer to the day-to-day social context that researchers work in.

Conclusions. Overall, we conclude that our data shows that empowerment can be stimulated via an online course on responsible conduct of research.

Keywords: Responsible Conduct of Research (RCR); empowerment; Small Private Online Course (SPOC); research integrity training

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DANIEL J. HURST*

The Utility of a Bioethics Doctorate: Results of a Survey of ABD Students and Graduates from US Bioethics Doctoral Programs

Background. This proposed paper presentation presents the results of a study conducted in 2020.

Aim/purpose. Paper investigates the utility of a bioethics doctorate on the basis of a survey of ABD students and graduates from US bioethics doctoral programs.

Empirical methods and/or theoretical perspective. The researchers surveyed both doctoral graduates and ABD (all but dissertation; those who have finished all doctoral program requirements but their dissertation) students of four US-based institutions with bioethics doctoral programs to ascertain their perspectives on a number of items regarding their doctoral training and their perception of how that training prepared them for their current roles as professional bioethicists in the workforce.

Results, outcomes and implications. Responses from 34 participants who completed the survey were assessed. Generally, respondents had positive overall views on the utility of a bioethics doctorate, the educational training they received in their respective programs, and how the bioethics doctorate prepared them for their roles as professional bioethicists. A number of areas for improvement were identified, including better structured clinical ethics training, greater opportunities for research and publishing, and having the ability to teach during their doctoral program, as well as formal pedagogy training.

Conclusions. These findings will be presented with recommendation to address areas of improvement proposed.

Keywords: bioethics doctorate; survey; ABD students and graduates from US

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Methods to Madness: An Educational Approach to Clinical Consultation

Background. Clinical ethics is a field that requires critical thinking, compassion, and creativity. Experts in the field and organizations, such as the American Society for Bioethics and Humanities (ASBH), commit to providing resources that spur imagination and scholarship. As a result, individuals can explore cases and research to increase critical thinking skills, lean on experiences to cultivate compassion, and tap into creativity to solve complex concerns specific to the patient and populations served. Educators seek to provide methods to approach ethical concerns in preparation for clinical consultation. Methods include: (1) Jonsen's Four Topics, (2) the Magill Method, (3) the Right Decision Method, and (4) Principlism. Ethicists must be familiar with and practice ethical consultation. Familiarity allows students to develop a foundational and systematic approach to ethical reasoning. Meanwhile, consistency creates critical thinking habits for students to employ on the job. The paper serves two purposes. First, reflections on clinical experiences are critical for professional development. Reflection allows for the intentional processing of lessons learned for future practice. Clinical opportunities are foundational for ethics consultations, policy development, and training. Second, the paper seeks to explore role-play cases. Clinical ethics serves a role in various aspects of healthcare and daily life. Therefore, the cases draw inspiration from medical experience, literature, and medical television shows such as *Grey's Anatomy*, *Chicago Med*, and *The Resident*. The clinical cases conclude with questions to spark discussion and promote active learning. Overall, the goal is to reaffirm the necessity of critical thinking, compassion, and creativity in clinical ethics.

Aim/purpose. The educational course aims to expose students to ethical issues, critical thinking, and rational decision-making in healthcare. The step-wise process encourages a holistic approach to ethical reasoning.

Empirical methods and/or theoretical perspective. NIA.

Results, outcomes, and implications. At the time of abstract submission, results, outcomes, and implications are unavailable.

Conclusions. At the time of abstract submission, the conclusion is unavailable.

Keywords: clinical ethics; education; consultation methods; ethical reasoning

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Ethical Issues in the Croatian Gymnasium Curriculum of Philosophy and Related Philosophy Textbooks

Background. In Croatian gymnasiums, in addition to the philosophical subjects Logic (a compulsory subject in the 3rd grade) and Ethics (from the 1st to the 4th grade a compulsory subject for students who do not attend Religious Education), there is also a separate subject Philosophy, as a compulsory subject in the 4th grade. As part of the *Comprehensive Curriculum Reform*, in 2019 a new curriculum for the subject Philosophy was adopted and entered into force, and in 2021 three textbooks (with additional digital contents) were published and approved by the Croatian Ministry of Science and Education, so they started to be used in the schools from the school year 2021/2022. Both in the curriculum and in the textbooks, ethical issues occupy an important place. One compulsory domain within the curriculum and textbooks is dedicated to ethics, under the title “Action and Orientation”, which is accompanied by an additional, but elective domain of the same title, while the ethical contents are also present in some other domains (which are dedicated to other philosophical disciplines).

Aim/purpose. In this paper, we first present the entire Croatian gymnasium curriculum of the subject Philosophy, and then focus on those segments of the curriculum and corresponding textbooks that are dedicated to ethical issues.

Empirical methods and/or theoretical perspective. The paper tries to carry out a maximally objective analysis of the Croatian gymnasium curriculum of Philosophy and a comparative analysis of three related textbooks, as well as to offer a critical review of the curriculum and textbooks. We also try to offer a close interpretation of the background, contents and particular solutions in the curriculum and textbooks, enabled by the fact that the author of this paper was one of the authors of the Philosophy curriculum and co-author of one of the current Philosophy textbooks (Hrvoje Jurić, Katarina Stupalo, *Philosophy: Textbook for the Fourth Grade of Gymnasium*, Zagreb: Školska knjiga, 2021).

Results, outcomes and implications. Although the teaching of philosophy in Croatian gymnasiums has a long tradition and has always been based on solid curricula and textbooks, within the *Comprehensive Curriculum Reform* the need to change the approach to teaching philosophy, including the teaching of ethics as part of the subject Philosophy, was realized. Basically, the new curriculum tried to adapt the teaching of philosophy to the “Zeitgeist” and to the possibilities and interests of the students, but making sure that important philosophical contents are conveyed in an appropriate way and that there is no unjustified simplification and banalization. The authors of the textbooks largely followed this intention of the curriculum. All this also applies to ethical issues in the curriculum and textbooks. The reactions of teachers and students so far are quite positive, but it would be useful to carry out a thorough research of the attitudes of teachers and students about the current curriculum and textbooks.

Conclusions. In the Croatian gymnasium curriculum of the subject Philosophy and related textbooks, ethical issues and ethics as a philosophical discipline are adequately represented, fully in accordance with the important place that ethics occupies in philosophy as a whole. Ethical concepts, approaches, theories, authors and topics are covered in a satisfactory manner, and not only the key, “canonical” ones, but also those that until now have been treated rarely or not at all in teaching philosophy. Since both the curriculum and the textbooks are more than solid from a methodological and didactic point of view, they represent a good basis and framework for quality teaching of philosophy, which undoubtedly also applies to the ethical segment, especially if the teaching of philosophy is consciously and systematically connected with the teaching of other subjects, and not only those related to philosophy and other humanities, but also those related to social sciences, natural sciences and arts.

Keywords: ethics; philosophy; Croatian gymnasium curriculum of Philosophy; Croatian Philosophy textbooks

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Teaching Business Ethics in the Anthropocene

Background. Thanks to natural and earth sciences we are now aware of the fact that our planet is in the epoch of the Anthropocene where mankind has the ability to alter the self-regulating processes of the Earth. Johan Rockström et al. (2009) defined nine self-regulating processes or “planetary boundaries” (climate change; biodiversity loss; nitrogen and phosphorus cycles; stratospheric ozone depletion; ocean acidification; global freshwater use; change in land use; chemical pollution; and atmospheric aerosol loading), and Will Steffen et al. (2015) showed that the degradation of these planetary self-regulating processes is closely related to accelerating socio-economic changes in the last 50–60 years.

Aim/purpose. As social and economic activities have fundamental influences on planetary processes, the role of business ethics and business ethics education should be reconsidered. Now it is vital to reframe ethics education and to redefine its aims both at the undergraduate and graduate levels of business education in the light of the reality of the Anthropocene epoch.

Empirical methods and/or theoretical perspective. Nowadays it is not sufficient to teach business ethics as a management tool for profitmaking and to show how ethics scandals influence business and ethics education. It is vital for students to understand the wider environmental and social impacts of the business profession and to attain critical thinking towards mainstream business functioning. The complex environmental and social problems of the Anthropocene necessitate to reframe business ethics education for which the advances of natural and earth sciences can give a useful frame of reference. Moreover, Ian Mitroff (1998) argues that complex problems cannot be solved by considering only the scientific-technical (including the economic) dimension of life. Considering the interpersonal-social, the existential-spiritual, and the systemic-ecological dimensions are equally important.

Results, outcomes, and implications. A new approach in business ethics education should integrate not only different scientific, but various cultural, and spiritual perspectives. For doing this interdisciplinarity and pluriperspectivism are indispensable. In practice it means that business ethics education must provide illustrative examples by: (i) analysing crucial corporate ethics cases in multiple perspectives, (ii) introducing innovative and progressive business models which serve human flourishing and ecological regeneration, and (iii) helping students to generate new business and entrepreneurial ideas which fit the Anthropocene reality.

Conclusions. The reality of the Anthropocene urges us to reframe the curriculum of business ethics education to address real world problems and challenges. Thus, it becomes possible that business in its renewed forms will not be part of the problems of the Anthropocene, but an integral part of the possible solutions.

Keywords: Anthropocene; business ethics education; business schools; interdisciplinarity and pluriperspectivism

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The Attitudes of Community Pharmacists Towards Compromising Their Ethical Values and Conscientious Objection

Background. Ethical issues are closely related to everyday work at community pharmacies and pharmacists are often in the situations to decide between more procedures with consequential impact on the rights and benefit of other people. The education they receive at undergraduate study might be insufficient for ethical decision-making on complex situations in clinical practice. Ethical values make a substantial part in any discussion on ethics and ethical behaviour, but teaching about moral values are not mandatory for any healthcare professionals in Serbia, pharmacists as well, neither at graduate nor postgraduate levels and continuing professional development. Conducting empirical research from pharmacy ethics could help educators and practitioners to develop and implement those topics into curricula and improve the educational outcomes in the field of pharmacy ethics. This could lead to tailor-based educational model that might empower community pharmacists to more significantly resolve situations regarding conscientious objection and ensure better understanding of reasons behind their behaviour, when delivering pharmaceutical care.

Aim/purpose. This study aimed to assess the perception of pharmacists regarding the situations that raised ethical issues of conscientious objection and their concerns related to compromising ethical values while caring for patients' healthcare needs at community-based settings.

Empirical methods and/or theoretical perspective. The research presented is only a part of a broader research work conducted in Serbia on community pharmacists' values and ethical dilemmas faced by them. A descriptive, cross-sectional study was conducted among 153 community pharmacists from the northern region of Serbia. The survey instrument had been developed and validated originally (Crnjanski et al., 2016) as a 16-items self-administered survey instrument with proposed ethical situations – EISP scale (Ethical Issue Scale for Community Pharmacy Setting).

Results, outcomes and implications. Participants were predominantly female (75.20%) with an average age of 34.48±9.05 years. Every tenth respondent had completed post-graduate education. The largest proportion of pharmacists (61.4%) faced ethical dilemmas in everyday work. Nearly all (90.20%) believed that pharmacists should have the right to file a conscientious objection when they are unable to provide services to a patient due to moral reasons. More than half of pharmacists (60.58%) stated that they had never compromised their ethical values. A vast majority (71%) would never do it, under any circumstances, and slight minority of them (13%) would compromise it for their own well-being. Pharmacists expressed the greatest concern that when compromising ethical values, they could harm the patients (56.2%) and could call their competence into question (26.8%). The least important were worries to potential legal problems (12.4%) and disclosure of actions by superiors (4.6%).

Conclusions. In conclusion, community pharmacists in Serbia are confronted with numerous ethical problems when they might reasonably decide to compromise ethical values. Most of the pharmacists face the ethical dilemma situations when they are unable to provide services due to conscientious objection or collision with their values. It is observed that they would compromise their values rarely and not only because of employers' request or their own interests, but also because of the patient's interests and moral duty to care. A value-based education for pharmacists could help them and empower them in resolving ethical problems in practice.

Keywords: pharmacy practice; pharmacy ethics; ethical problem-solving; pharmacy education

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Ethics Education in High School in Croatia: How the New National Curriculum for Ethics Was Created, Why It Almost Disappeared, and How It Changed

Ethics Education in Croatia

Background. Ethics education in the Croatian secondary school system is primarily present in the form of a separate subject called *Ethics*. As a “compulsory-optional subject” *Ethics* is one of the two subjects students have an option to attend: *Religion* (Catholic, although Orthodox and Islamic are also available in some schools) or *Ethics*. As a subject, *Ethics* was introduced in the early ‘90s closely after the proclamation of the Republic of Croatia as an independent state and for a quarter of a century it was taught following the *National Program for Ethics* created back in 1994. In the school year 2019/2020, the first generation of students attended ethics education following the new *National Curriculum for Ethics* (the *NCE*) and learned from new modernized textbooks and digital materials for ethics education.

Aim/purpose. The purpose of this presentation is to show key milestones in development of ethics education in Croatian high schools. The central place is given to the outcomes and contents of the *NCE*. It will also show how the *NCE* defines the role of a teacher, the organization of student learning experiences, and the process of evaluating students’ progress in ethics education. To demonstrate the alignment of the learning materials with the *NCE*, a sample lesson from one of the textbooks will be presented.

Empirical methods and/or theoretical perspective. Adoption of the *NCE* was a part of the national reform of the primary and secondary education system in Croatia known as the “Comprehensive Curriculum Reform” (the *CCR*) which began in 2015. The national curricula of all subjects were completed in a period of one year. After the parliamentary elections in 2016 and the new political party forming the government, the work of hundreds of experts was stopped. The presentation aims to explain how and thanks to whom the curriculum documents were finally completed and passed in the Croatian Parliament on January 18, 2019.

Results, outcomes and implications. The *NCE* was introduced gradually, from the school year 2019/2020 for the 1st grade students (age 14) until 2021/2022 for the 4th grade students (age 18). The implementation of the *NCE* was followed by the publication of new modern textbooks for all four grades, with both printed and digital materials. Later, the *NCE* served as an excellent framework for adopting a curriculum for a similar subject intended for primary schools, which is expected to be introduced in the school year 2023/2024.

Conclusions. The *NCE* brought significant improvements to ethics education in Croatia. However, the reform failed to solve one of the key problems. As a subject, *Ethics* is still not available to every student in Croatia and the students who choose *Religion* remain deprived of ethics education. Improving the position of ethics education in Croatia remains an ongoing process for as long as *Ethics* exists only as an alternative to *Religion*. It is the responsibility of all professionals dedicated to ethics education in Croatia to advocate for changes in the education system that will enable all students to attend *Ethics* both in high school and elementary school, not just those who choose not to attend *Religion*.

Keywords: Ethics curriculum; ethics education in high school; ethics as a school subject; ethics in Croatia

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Enhancing Ethics Education from Experience: Ethics and Humanized Care in Neonatal Nursing Amid the COVID-19 Pandemic

Background. The COVID-19 pandemic caused tremendous changes in human life. The implications of this public health emergency on patients, families, and health professionals, particularly in neonatal care, were dramatic.

Aim/purpose. A study entitled “Nurses’ Experiences of Newborn Care” was conducted, aiming to understand the nurses’ experience in care for newborns hospitalised in neonatal units amidst the COVID-19 pandemic.

Empirical methods and/or theoretical perspective. Qualitative study with a descriptive, exploratory, and phenomenological approach. Interviews were conducted with 15 nurses working in Portuguese neonatal units between March 2020 and June 2022. Data analysis was performed using Bardin’s content analysis.

Results, outcomes and implications. Two main themes emerged: The SELF as a Person and the SELF as a Nurse, categorized with relevant data for professional practice and the teaching of ethics and humanisation of nursing care. The category “Search for Humanity” highlights the difficulties when facing the identityless other, the need to break the rules and recover humanisation and develop strategies to provide compassionate care for the newborns and their parents, to nurture and overcome loneliness. Nurses perceived that the measures to mitigate the adverse COVID-19 pandemic effects, namely those related to the use of PPE and the parents’ withdrawal from the neonatal units, had an unprecedented impact on the humanisation of care. Nurses and parents were much alike while interacting together, people without identity, hidden behind their masks to ensure physical distancing but weakening the emotional ties. The impact of parents being separated from their babies was perceived by nurses through signs of loneliness and lack of affection from the newborn. To minimise its effects, nurses faced a profound dilemma of following the isolation policies or risking exposure. Amidst the pandemic, nurses started to perceive the lower effects of COVID-19 on newborns and neonatal services. According to the nurses, acknowledging this reality from the beginning would have impacted their actions since the partnership of care, as the integral component of the philosophy of care in neonatology, had to be revived. Ultimately, what took years to build was almost lost. Understanding these nurses’ experiences and the meaning they attributed to their daily living may contribute to developing strategies enabling robust informed decision-making when facing similar situations, namely in ethics decision-making. In addition to the traditional academic context, ethical education should also be part of the nurses’ continuous training. The development of lifelong training activities is proposed, to empower nurses on ethical decisions in clinical settings, particularly in crisis situations. The creation of privileged moments to exchange experiences and knowledge and analyse ethical dilemmas experienced among all healthcare team members are to be considered. Ethics committees are essential to the structuring of training adapted to each clinical context and as consultants and facilitators of team meetings.

Conclusions. The pandemic situation added new ethical dilemmas to professionals. This reality has drawn attention to ethical education and the importance of exploring this concept in academic and professional settings as a facilitating strategy for decision-making, empowering professionals with skills and knowledge to alleviate moral suffering amidst such dramatic advents.

Keywords: ethics education; humanised care; neonatal nursing; COVID-19

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I (Don't) Understand How Medical AI Works: Attitudes of Medical Students on Ethical Issues of Digital Technologies Applied in Healthcare

Background. In the last decades, medical practice underwent a paradigmatic shift by becoming more and more technological professions very much dependent on technology. Medical knowledge kept expanding rapidly, and the digitalisation of healthcare became an inevitable process to improve diagnostic accuracy, increase access to care and reduce medical costs. Artificial intelligence (AI) technology has the potential to help physicians to use their medical knowledge effectively in practice. Still, it also implies, for a medical student, the necessity to understand the fundamental concepts of AI. Hence, this foreknowledge is particularly important in being aware of ethical challenges related to this kind of technology, such as bias, lack of transparency and explainability, unclear responsibilities and liabilities in case of errors or harm, and privacy concerns. AI can also significantly impact the patient-physician relationship and change the fundamental understanding of its essential determinants like empathy, trust, or human encounter.

Aim/purpose. From October to December 2022, the Digit-HeaL research group conducted quantitative research (*pen-and-paper* survey) to examine medical students' attitudes, perceptions, and expectations about digital technologies use, especially artificial intelligence, in health care.

Empirical methods and/or theoretical perspective. The questionnaire focused on socio-demographic characteristics, current medical ethics/bioethics and AI foreknowledge, employment expectations, prospects of using AI in practice, and changes in the patient-physician relationship. Participants rated their agreement with the use of AI and existing ethical issues and expressed an opinion on the usefulness, benefits, and risk of implementing AI technology. In total, 1715 students participated in research from all Medical Faculties in Croatia (5) and Slovakia (3). These two Central Eastern European countries are members of the European Union and face similar challenges as an ageing population, increased demand for healthcare services, and a shortage of healthcare professionals.

Results, outcomes and implications. The results of our study revealed that almost 30% of students rate their medical ethics/bioethics knowledge as unsatisfactory (mark 1) or satisfactory (mark 2), and only 3% as excellent (mark 5). They see the most significant potential for AI in medicine in data analysis for disease probabilities and the lowest for empathy care. Almost 60% of students expressed concern that AI will negatively affect their relationship with patients, making patients trust them less. As regards the responsibility & liability in case of medical errors and patient injuries, students find among the ones who should bear the responsibility: the manufacturer of the technology (41.2%), the institution in which it is implemented (22.6%), and only 10% think that physicians should be responsible. The majority consider that they will be able to explain to patients how AI works.

Conclusions. Preliminary results provide new insights into medical students' attitudes and can be valuable in modernising the curriculum. Primarily, there is a vast opportunity for medical ethics/bioethics to raise awareness and empower students with the knowledge and critical thinking skills to identify, analyse and address potential issues they will encounter in the future.

Keywords: medical students; artificial intelligence; medical ethics; ethical issues

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“I” in Research Integrity:

Introducing an Art Session into a Research Integrity Course

Background. Art-based learning has been widely applied in medical education. Creating art is known to foster creativity, empathy, observation, and reflection, as well as to promote a synthesis of different types of knowledge. Although different programs of research integrity (RI) education have been developed over the past decades, participants from past qualitative research expressed the need for diverse and combined approaches to encourage comprehensive learning on the topic.

Aim/purpose. We introduced an art session into the curriculum of the Summer School on Responsible Research held at the University of Split School of Medicine in Croatia. The aim was to provide an interdisciplinary perspective on RI both to participants, as well as to simultaneously construct new knowledge on how RI is perceived through a novel teaching modality.

Empirical methods and/or theoretical perspective. Summer School participants and teachers used tempera on canvas to illustrate how they see themselves in RI (“I” in research integrity). They painted a picture and then answered a demographic data survey, gave a title, and wrote a brief text describing their painting. No ethics approval was required, as all participants are authors.

Results, outcomes and implications. Most of the authors came from biomedical sciences and were academic researchers, with a predominance of women (13 out of 19). The titles of the paintings ranged from ambiguous (e.g. “Circles” or “Equilibrium”) to more concrete (e.g. “The temptation of image manipulation”). Some created monochromatic images while others added newspaper pieces or used flour to create volume in their paintings. In the description of the figures, some of us aligned the paintings with classical research integrity themes such as morality, transparency, or data manipulation. Naturalistic images like sunflowers, beaches, and trees were linked to RI. Motives of fighting various forces and attempts to draw balance were also used. We present the art that came out of the session, as well as textual descriptions of participants on what their picture presents.

Conclusions. The RI area is very complex, and individuals understand and see it differently. Using art in teaching RI may be an excellent way to stimulate introspection and discussion about RI, as well as to understand better how researchers perceive the concept of RI.

Keywords: research integrity; interdisciplinarity; art-based learning

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Opportunities to Increase Translational Thinking and Build Community in Online Courses through an Expanded View of Resource Diversity

Background. Contemporary education acknowledges the importance of promoting diversity and incorporating multiple perspectives. Educators actively shape the communities which form in their courses through content and pedagogy, and these choices are value-laden. Thus, intentionality in the selection of course materials is essential in assuring inclusivity and facilitating meaningful discourse. Failure to thoughtfully engage course materials and educational technology may result in the perpetuation of particular and/or problematic ways of knowing, being, and learning. Bioethics education has opportunities for development in two key areas. First, not enough attention is given to seeking diversity in the medium, domain, voice, and source of course materials, thereby failing to account for systemic and historical influences on the perspectives which exist in them. Second, bioethics is an interdisciplinary field with valuable insights to be found in many sources and not well-encapsulated by solely academic perspectives.

Aim/purpose. We argue a multi-perspective, multi-modal approach to course material selection embraces the call of diversity to challenge our perspectives, think more deeply, and learn with and from one another. It makes space for historically underrepresented groups, helps correct for systemic barriers, facilitates translational thinking from bioethics in theory to practice, and allows students to better connect to content. Moreover, it recognizes the myriad of professional and academic backgrounds of bioethics students and their future as ethics professionals working in multicultural environments and engaging pluralistic perspectives. Yet, there is tension in also recognizing the reality of the field and the necessity of knowing seminal works, as well as the reality of time constraints and expectations for content mastery within a course. We sought to balance familiarity with the major works in the field with the promotion of a multi-perspective approach; identify the sources most helpful to fostering connection and robust academic discussion; increase the quality of discussions; and increase educator confidence in sourcing diverse course materials.

Empirical methods and/or theoretical perspective. We designed an initiative at a large state institution focused on two, interconnected graduate courses aiming to promote a multi-perspective approach and increase diversity in the online learning context. Specific strategies included a course statement outlining commitment to selecting diverse materials and inviting students to actively build community; a combination of resources to lay a foundation and inspire robust discussion; and assignments designed to encourage integration of professional expertise, lived experience, and course content.

Results, outcomes and implications. Overall, students responded positively to the initiative. Challenges included increased labor requirements for course instructors, especially in light of a developing skill set in sourcing materials, and data limitations. Future directions include steps to obtain more robust data insights and collaborations to develop resources able to be utilized by faculty on a broader scale.

Conclusions. Ultimately, we argue incorporating diverse sources and perspectives into course materials invites students to be active participants in building unique, scholarly communities grounded in lived experience, academic rigor, robust discourse, and a commitment to diversity and inclusion. Further, we emphasize the unique opportunities offered by using an online teaching platform to help educators think more broadly when considering approaches to equity in education.

Keywords: intentionality; inclusivity; resource diversity; multi-perspective and multi-modal

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How Good Are Medical Students in Detecting Duplications in Digital Images from Research Articles: A Cross-Sectional Survey

Background. Image manipulation with the intent of misrepresenting the results of a scientific experiment is considered to be serious research misconduct. Such manipulations include cropping, colour adjustment, selective enhancement, and duplication, among other techniques. Recent studies have shown that this phenomenon is more prevalent in science than previously thought, pointing to a need for both comprehensive education on research ethics and training of editors and scientists on recognizing image manipulations.

Aim/purpose. We aim to explore the capability of students of medicine, dental medicine, and pharmacy to detect duplications in scientific figures by administering a questionnaire comprising a series of images with cases of duplications of image elements.

Empirical methods and/or theoretical perspective. We created a questionnaire with six tasks with images (Western blots, cell culture, and histological sections) representing different experimental groups. Each image included one or more of three duplication categories: simple duplication, duplication with repositioning, or duplication with alteration. We selected the images from *Science Integrity Digest*, *Retraction Watch*, and *PubPeer*. The images contain a total of 19 duplications; the students can score a maximum of 25 points for correct duplicate detection, as some duplications occur multiple times. We are currently testing students of medicine (both the Croatian and the English programme), dental medicine, and pharmacy programmes at the University of Split School of Medicine. The students are required to detect duplications in the images and mark them with a coloured pencil, with each colour representing one detected case of duplication. We aim to fully survey students from all years of all programmes, collecting approximately 80 questionnaires per year of medicine and 30 per year of the other two programmes, based on initial quotas for programme enrolment. We intend to analyse both the number of correctly and incorrectly detected duplications and whether these correct detections mostly occurred with cell/histological or gel images. We present categorical data as frequencies and percentages or medians and interquartile ranges (IQR). We will compare the medians using the Wilcoxon rank-sum test.

Results, outcomes and implications. As of the submission date, we piloted the questionnaire on a group of 34 medical students, 29 (85.29%) of whom were female, with a mean age of 19.4 years (standard deviation (SD)=19.4). The median number of correctly marked duplications was 9 (IQR=3) (36% of total correct answers), while the median number of incorrectly marked duplications was 2 (IQR=3.75). Students found more duplications relating to gel images (median=5.50, IQR=3) than cell/tissue images (median=4, IQR=1) ($P<0.001$).

Conclusions. Based on this preliminary analysis, it seems that students, on the whole, have poor skills in detecting image manipulations. Overall, there is a need to implement comprehensive training and educational efforts to increase the awareness of such cases of research misconduct, as well as the ability to identify them in practice.

Keywords: image manipulation; research ethics; research misconduct; image duplication

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I Know the Right Thing to Do but I Just Can't Do It: The Role of Moral Distress in the Education of Healthcare Professionals

Background. The growing concern about moral distress attests to the prevalence and intensity of moral and other kinds of challenges within the healthcare system. Moral distress occurs when one knows the right thing to do, but external constraints make it impossible to pursue the right course of action. It has numerous possible causes, inner and outer ones, while also being able to threaten the very purpose of existence of health care systems as well as its constitutive agents. Despite being, a rather common issue within contemporary health care systems, until very recently (a state, as many others, thoroughly accentuated within pandemic COVID-19 context) moral distress remained vastly neglected, not only in theory and practice but also in the education of healthcare professionals.

Aim/purpose. The aim of this paper is to provide and discuss relevant theoretical underpinnings and potential practical concerns regarding the implementation of educational processes within medical schools' curricula that are more sensitive to the issue of moral distress (and related notions) and more able to equip future healthcare professionals with necessary competencies for its prevention, mitigation and management.

Empirical methods and/or theoretical perspective. This study employed a mix-method approach, based on a structured literature review and a survey of a convenient sample of healthcare professionals. Through the survey, both quantitative and qualitative data on the participants' experiences of moral distress and moral injury, as well as their perceptions on how those issues can best be addressed within various educational trajectories are collected and analysed.

Results, outcomes and implications. The results of this study mirror the findings in the available literature. As a common denominator of moral distress, inability to act in accordance to one's own moral values and beliefs can be singled out. Similarly to other findings, causes of moral distress are most commonly attributed to external factors or constraints, which are quite diverse. Importantly, through the study a rather unique, stepped approach to addressing and tackling moral distress within education emerged. This approach is based on multiple layers, namely those of promotion, prevention, early intervention, treatment/intervention, and rehabilitation, and can be seen as being a part of a more general, comprehensive model aimed at fostering mental and moral wellbeing of its participants.

Conclusions. Ultimately, prevention layer seems to be critical and is heavily reliant on the notion of advocacy (or willingness and ability to drive and lead necessary changes) while sensitivity to fundamental and accidental uncertainties (part of the promotion layer) seems to be a certain kind of necessary precondition.

Keywords: moral distress; moral injury; education; bioethics

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Should We Think More and Know Less or Another Way Around? Uses of Artificial Intelligence Based Large Language Models in Medical Education and Its Potential Consequences

Background. Due to the enormous increase in the kind, volume and scale of data collected within the realm of health care, the ability to adequately process it without using various technologies seems a rather questionable or even futile endeavour. However, the use of technologies, especially those endowed with some sort of (artificial) intelligence, is not without challenges. Quite the opposite, it seems that once again, our reflexions, moral and of all other kinds, seem to be lagging quite behind our abilities to create and use such technologies. All of this creates a certain fundamental gap between our (re)actions and our abilities to reliably and coherently comprehend them and their consequences. A gap that might be of special relevance particularly within medical education.

Aim/purpose. The purpose of this paper is to explore the gap between our growing abilities to act upon affordances provided by technological tools such as artificial intelligence (AI) based large language models, such as ChatGPT, and the ways how that gap ought to be addressed in the context of medical education.

Empirical methods and/or theoretical perspective. A comprehensive, structured literature review was performed by searching common scientific databases (*PubMED*, *Embase*, *Science Direct*) and preprint databases (*bioRxiv*, *medRxiv*) in order to explore potential uses of (AI) based large language models, namely ChatGPT, in medical education. The themes from selected primary sources are structured and represented in order to provide a starting point for their reflexive (ethical) analysis and discussion.

Results, outcomes and implications. There is a significant potential for ChatGPT to be used as an effective educational tool in medical education, an exponentially growing field in which keeping up to date with a large amount of data is an unavoidable imperative. As such, it can be of great help both for those teaching and those that ought to be taught. However, its use in the context of medical education raises numerous issues, most of them with a profound ethical makeup. Most common issues raised in literature in that sense are those related to: (1) AI-generated writing, such as plagiarism, cheating, and accuracy issues; (2) unintended bias in the (pre) training data or appropriateness scoring and prioritization systems; (3) transparency of the model's decision-making process (including both black-box and intractability concerns); and finally, (4) seductiveness and decisiveness. Medical students will walk into a world full of generative AI technologies as they are an inevitable part of the future. They need to learn the right way to use these tools, their strengths, and weaknesses, to work alongside them in the medical field. The role of ethics, besides indispensable hand-on experience, here seems to be of vital importance, as it, properly understood and applied correctly, allows much needed, a certain right kind of reflexivity. Otherwise, ethics also, if not properly understood and applied correctly, can be subsumed being just more or less elaborate afterthought.

Conclusions. To be good doctors, they will need hands-on experience to understand this type of AI, what types of bias it contains, and how it can be misused and weaponized. Who is better to guide them in the ethics of AI use than their professors?

Keywords: education, medical students, ChatGPT, bioethics

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Improving Interdisciplinary Communication and Collaboration to Impact Better ACP Conversations

Background. Advance Care Planning (ACP) conversations is seen as a cornerstone of modern healthcare and needs to be supported. However, research indicates that the uptake thereof is limited, regardless of various campaigns and legislation. Advance care planning has been heralded, as a mechanism, to support patient rights, autonomy, and dignity in a patient's healthcare trajectory. By satisfying the ethical principles, through ACP conversations, healthcare professionals do not only attempt to minimize potential future harms, they also put the patient at the center of care-planning. Various gaps in ACP adaptation within systems have been identified. One being interdisciplinary communication and collaboration.

Aim/purpose. The aim is to share what the author, as the operational lead of implementing changes to the ACP process at their institution with various hospitals, and over 2,200 MDs and APPs, have done to counter interdisciplinary obstacles. They will share the barriers and how it was addressed.

Empirical methods and/or theoretical perspective. The aforementioned is based on Adult Learning Theory.

Results, outcomes and implications. Having a system-wide operational plan, which incorporates members from a interdisciplinary group, helps alleviate barriers in having appropriate ACP conversations. Strategies and successes on how to implement a system-wide ACP program will be shared. After two years the author's institution has increased ACP conversations, have documented an increase from 12% to 76%, have effectively lowered the deaths in the ICU; lowered length of stay; and have relieved the financial burden of patients and their families. Focusing on adequate ACP conversations is a moral imperative for institutions.

Conclusions. ACP conversations cannot be static and needs to be dynamic as patients' illness trajectories and goals change. The care team needs to guard themselves against having ACP conversations to satisfy a metric and should instead be guided by the patient's expressed values and wishes.

Keywords: Advance Care Planning (ACP); collaboration; interdisciplinarity; ethics

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Developing the Students' Competences in Research Ethics: A Case of Lithuanian University of Health Sciences

Background. The increasing importance of research ethics in medical education is widely recognized. The enhancement of students' scientific integrity and development of practical skills of human-related research is declared as a must in many medical schools. Even though student level research was conventionally delegated to a variety university-based research ethics committees (UREC), the functions of such institutional bodies are not clearly defined in contrast to the harmonized system of Research Ethics Committees, at least in the European context.

Aim/purpose. The aim of this paper is to share the experiences of ethical review practice at the Bioethics Center (BEC) in Lithuanian University of Health Sciences (LUHS) and to discuss the needs to tackle this question internationally.

Empirical methods and/or theoretical perspective. A case study method is used to show the role of BEC in forming the skills of research ethics to students (the future researchers) at the LUHS.

Results, outcomes and implications. The Bioethics Center at LUHS is currently responsible for the revision and approval of student research and other educational projects related to humans and in some cases to animals. To educate students more efficiently, we have elaborated some relatively innovative tools. One of them is the ethical self-assessment form that includes such relevant topics as ethical justification and clarification of methodology, dealing with vulnerable groups, sample size, risks related to assessment of research participants, the process of gaining informed consent, and data protection. Our experience showed that ethical self-assessment plays significant role in developing students' (and supervisors) awareness of such concepts as academic integrity, academic freedom, transparency, confidentiality or preventing any forms of scientific misconduct in research practice. Ethical review is also useful step of research design that stimulates seeking ethical ways of testing scientific hypotheses. On other hand, new challenges such as difficulties in drawing the borderline between biomedical and non-biomedical research, discrepancies between study goals and research requirements as well as the high demand for additional assistance are asking for reconsideration. As BEC never rejects research projects of students it either guides them through improvements of research design to fit with the principles of research ethics or refers to national ethical bodies in case they must be reviewed by law. For example, during the last academic year, 6.8 % (79/1169 cases) of student research projects were filtered as biomedical research and were turned off to regional research ethics committee (66) or animal research committee at the State Food and Veterinary Service (13). Our experience showed that ethical self-assessment plays significant role in developing students' (and supervisors) awareness of such concepts as academic integrity, transparency, confidentiality or preventing any forms of scientific misconduct in research practice.

Conclusions. We suggest that the mission and vision of institutional bodies that advocate research ethics values should be debated at the international level. We assume that future medical doctors should be ready to cope with scientific integrity issues through real practice of research ethics.

Keywords: research ethics; medical education; ethical review; integrity

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Ethics, Transdisciplinarity and Orientation: Two Cases from Italian Context

Background. The pandemic crisis represents a moment of change for educational and didactical methodologies. In this paper I analyse this possible change through two different practical cases, one emerging in a survey, one emerging in a laboratorial experience in high schools.

Aim/purpose. The purpose of this analysis is to show how the rising of an ethical ability is a way to mix different disciplines and to obtain a better development not only in ethical knowledge inside, but most of all outside ethical field in the development of other competencies, skills, disciplines. For example, in the high schools experience we obtained a better educational orientation in the passage from high school to University.

Empirical methods and/or theoretical perspective. In the first case we have a survey conducted in last year within the courses of Medicine, Surgery and Nursing (University of Padua) with 500 students. This survey highlights in the students a lack of interconnection between discipline and a deep fragmentation. The second case is a bioethics project in fourth and fifth year of high school classes, with the intervention of clinic experts from the hospitals and ethical committees, a bioethical introduction to teachers and mentors, a discussion with the students, the presentation of the students of their results, sometimes the simulation of an ethical committee's meeting/discussion.

Results, outcomes and implications. We can see in these cases the need of interconnection between disciplines, the role of ethics in moderating the specialization of knowledge, especially in the first year of Medicine and Surgery. On the other side we can test a growing of ethical competencies of classes in high school, after the bioethics project, not only in bioethics knowledge, but above all in the orientation in period of relevant choices for life. The bioethical field was often in Italian context a field of conflict between religious and non-religious vision of birth, life, suffering and death. In these cases, bioethics becomes a field of dialogue. Another result is the necessity of ethics and bioethics in scientific faculties, in Medicine as in new departments between emergent and convergent technologies.

Conclusions. The theoretical side of these two cases is the fundamental dialogical situation between disciplines, allowing a deeper reflection on the role of ethics not only in the foundational, descriptive and normative field but also as an educational ethics that opens to a common future. The educational side of ethics seems to become the first path of ethics in relation to society and public context.

Keywords: ethics; transdisciplinarity; orientation; education

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Ethical and Health Literacy for a Good Life? Results of a Qualitative Study on Moral Values in Advance Directives

Background. In Germany, advance directives (AD) are legally recognized documents that count as an expression of the author's self-determined will regarding his/her medical treatment in later life. In completing an AD, individual conceptions of the good life play a major role. So far, ethical debates primarily assessed the formal structure and legal validity of AD whereas questions regarding the actual content, the author's moral values and also his/her knowledge about AD were rarely considered. However, different layers of ethical questions are involved here: What significance do ideas of health, aging and dying have for AD? What values and wishes matter? And above all: What level of ethical and health literacy is necessary for people to plan future treatment and care?

Aim/purpose. The aim of the study is to identify moral values and conceptions of a good life that shape attitudes towards later life, to develop a typology of motives that influence engagement in AD, and to gain insight into individual considerations while issuing of an AD.

Empirical methods and/or theoretical perspective. Qualitative interviews, comprising questions about experiences and ideas regarding health, aging and dying, were conducted in Germany with 18 adults in four age groups. These individual perspectives were analysed from a teleological perspective considering ideas of a good life and contextualised with the personal engagement in completing an AD.

Results, outcomes and implications. People are often not aware of their fundamental values and convictions and their practical implications for ADs. A typology showing a range of notions that interviewees expressed concerning a good life and AD was developed. It highlights how some interviewees express certain values and wishes regarding later life but no explicit plans, or, how discrepancies between fundamental personal values and the will expressed in the AD occur. This indicates that striving for self-determination does not automatically entail the capacity to formulate congruent wishes for an AD. The identification of underlying implications has considerable teleological weight regarding personal orientations and individual impetus regarding future life phases.

Conclusions. The issuing of an AD requires ethical skills of self-reflection on one's own values and life plans, as well as a certain amount of health literacy in terms of the capability to appropriately use those tools that allow to exercise the right of self-determination. This becomes particularly clear in light of a teleological ethics of the good life, as personal orientations for later life touch upon questions of people's awareness of what they actually want and what they should want in life (and death). Individual values and wishes that motivate engagement in AD might have far-reaching implications for individual healthcare. This points to the necessity to promote individual ethical and health literacy to clear up what ADs are and what they are not, and to do justice to the underlying moral convictions and values. Moreover, their consideration is highly relevant for medical ethics education since they broaden the bioethical discourse about the impact and constraints of AD. Giving impulses to help raising people's awareness of their individual moral values is an educational challenge for healthcare professionals and ethics committees.

Keywords: advance directives; literacy; competence; teleological ethics

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Rethinking Bioethics in Light of Engineering Life Technologies

Background. The National Centers of Competence in Research (NCCRs) are an established federal funding instrument of the Swiss National Science Foundation (SNSF) for top-level research in Switzerland. Established in 2014, the NCCR “Molecular Systems Engineering” (NCCR MSE) in Basel is a cutting-edge trans-disciplinary research consortium combining chemistry, biology and engineering, allowing deep interventions in living organisms that will substantially impact human health and disease treatment. In light of the rapid advances in this field of research, we call for a rethinking of bioethics and the development of new platforms for ethical discourse on par.

Aim/purpose. Headed by the University of Basel and ETH Zurich and drawing on closely 100 researchers, NCCR MSE focusses on systems chemistry, systems biology and synthetic biology for the creation of chemical and biological modules integrated into molecular factories and cellular systems. The lack of adequate science-communication strategies and a research pace that outruns traditional bioethical processes, call for new communication approaches and open settings for moral reflection.

Empirical methods and/or theoretical perspective. Considering the enormous progress molecular systems engineering has made over the past years, its fundamental research objectives cannot be subject to ground-breaking ethical and societal debates anymore. Specifically, the focus no longer lies on the question *if* engineered molecular or cellular constructs should be put into human bodies but rather on *how* this will happen; and how humankind can agree on a catalogue of binding guidelines that will secure health and well-being for the recipients of this engineering life technology and ensure the adherence to fundamental ethical principles and human rights.

Results, outcomes and implications. In light of these developments, the NCCR MSE has developed a unique interdisciplinary framework for translational ethics called “Art of Molecule”. This new ethics matrix invites external religious, philosophical, political and scientific expertise along with representatives of the performing and visual arts to discuss, challenge and constructively engage in (re)formulating the project’s research goals.

Conclusions. There exists a need to translate the highly complex field of molecular systems engineering and the data it produces into a language that can be understood by all. The issue of power and the right to analyze, interpret and evaluate this research (“*Deutungshoheit*”) must be clearly defined in a process of participative democracy. Society at large needs to get involved when scientific innovation is about to burst the status quo of ethics and morality that leads to fundamental, paradigmatic changes – which undoubtedly holds true for the field of engineering life.

Keywords: molecular systems engineering; art of molecule; art-science communication; translational ethics

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On the Role of Physical Activities and Competitive Games in Aristotle's Account of Education: The Sport Philosophy Perspective

Background. In his work, Aristotle has considered the role of physical activity and competitive (Olympic) games in ethical education at several places in *Nicomachean Ethics*, *Rhetoric*, and *Politics*. Most of it was recognized and discussed in the philosophy of sport literature, with an emphasis on account of (bodily) excellence or perfectionism (Reid, López Frías, César Torres, Hurka, Pike), golden mean (Hwang, Kretchmar), and admiring pentathletes (Reid, Mareš).

Aim/purpose. With this paper I intend to critically consider the following questions in the sport philosophy literature (SPL): (1) Is it scholarly just usage of the term sport in the context of Aristotle or Ancient Greece? (2) What was the role of physical activity and competitive games in Aristotle's account on education? (3) What are the possible implications for today's ethical education?

Empirical methods and/or theoretical perspective. In order to achieve my aims, I will use the critical content analysis method and hermeneutical method from the sport philosophy perspective.

Results, outcomes and implications. First, the term 'sport' was used in most of the papers discussing competitive games and physical activities in Aristotle's works, which I find questionable. Second, despite keeping the body strong and healthy, the role of physical activity, contrary to SPL, did not play a significant role for Aristotle, and he was not paying much intention to involvement in competitive games. Third, ethical ideals of achieving *arête* and *kalokagathía* were rightly recognized as the ones that can serve as crucial aims in ethical education both then and now.

Conclusions. First, it seems that it would be scholarly just to avoid using the term sports in connection to Aristotle or Ancient Greece period in general. Secondly, a more precise and less interpretative account on the role of physical activity and competitive games in Aristotle's views on education would be much more appropriate. It seems that a clear division between physical activity and competitive games should be made before considering their role in education. Only then we can follow Aristotle in using only the former in ethical education. Finally, to the educational ideals of *arête* and *kalokagathía*, explication for/towards the good life in *sholé* should be added.

Keywords: Aristotle; physical education; *arête*; *kalokagathía*

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Ethical Decision-Making of Mental Health Practitioners in Therapeutic Work with Young People: A Systematic Review

Background. Ethical dilemmas in psychological practice are replete. Practitioners are confronted with decisions between ‘right’ and ‘wrong’ when needs, rights, expectations, and goals of multiple stakeholders compete. While ethical dilemmas vary in complexity, all require a step-by-step process of ethical decision-making to reach satisfactory resolution. This is especially the case in therapeutic work with young people. Though psychologists and other mental health practitioners work with young people routinely, scarce research is available to inform their ethical decision-making when faced with dilemma. Young people are an amorphous population but are commonly identified by their stage, adolescence, or age, approximately 14 to 17 years old. These young people are under the ‘age of majority’ but may have increased capacity to provide informed consent than their younger counter parts. As such, they may be known as ‘mature minors’ or ‘Gillick competent’. Do mental health practitioners have the same ethical obligations to mature minors as adult clients? Practitioners appear divergent in their response to this question despite the potential for ethical and legal consequence. Informed consent and its relative, confidentiality, are pillars of ethical practice. Informed consent is a process of obtaining an individual’s voluntary agreement to participate in therapy with sufficient understanding of its potential risks and benefits. Confidentiality is a key principle explained to young people in informed consent processes that requires practitioners to maintain a client’s privacy. Disclosure may be warranted in certain circumstances, such as risk of harm to the client or others. Both informed consent and confidentiality are essential but limited in their application.

Aim/purpose. This systematic literature review synthesised international literature on mental health practitioners’ perspectives (e.g., social workers, counsellors, psychologists) on ethical decision-making about informed consent and confidentiality in therapeutic work with young people.

Empirical methods and/or theoretical perspective. Studies were included since 1984 or the legal establishment of Gillick competence in the United Kingdom. The systematic search followed the Cochrane methodology and included nine databases. Grey literature was included to reduce the potential impact of publication bias.

Results, outcomes, and implications. Forty percent of the included studies ($n = 25$) originated in North America and 28% were from Israel, Argentina, the Caribbean Islands, Turkey, and China, collectively. This suggests that in the limited available literature, culturally diverse mental health practitioners and help-seeking young people are underrepresented. Most studies focused on issues of confidentiality ($n = 18$) and five explored informed consent and confidentiality in tandem. Practitioners frequently considered the nature of adolescent risk-behaviour (e.g., suicidal behaviour) and potential harm in their decision-making but were limited in their ability to reach consensus. Practitioners may benefit from further training and the development of specific guidelines to inform their practice.

Conclusions. There is substantial variance in practitioners’ ethical decision-making in therapeutic work with young people. Limited high-quality studies are available in this area. Greater understanding of practitioners’ ethical decision-making, what they do, may improve the specificity and efficacy of training in what they should do.

Keywords: ethical decision-making; adolescence; mental health

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Navigating the Ethical Web: Addressing Cultural Differences and the Problem of Cultural and Ethical Relativism in Ethics Education

Background. In today's increasingly interconnected world, people from diverse cultures, religions, and backgrounds come into contact with each other more frequently than ever before. This growing cultural diversity can create conflicts and misunderstandings, especially when it comes to ethical values and beliefs. However, cultural differences have always been a significant issue in ethics education. Many educators have struggled to teach ethical principles in a way that resonates with students from different cultural backgrounds. Moreover, some scholars argue that ethical relativism – the belief that ethical standards are relative to the culture in which they are developed, and cultural relativism – the view that moral values are relative to a particular culture, and there is no objective, universal moral truth – makes it difficult to teach a universal set of ethical principles.

Aim/purpose. The aim of this paper is to discuss the problem of cultural differences – cultural and ethical relativism – and the challenges it poses to ethics education, as well as to explore the potential solutions to this problem. The purpose is to raise awareness of the importance of cultural sensitivity in ethical decision-making and provide guidance for educators and students in navigating the complexities of cultural diversity.

Empirical methods and/or theoretical perspective. This paper draws on a range of theoretical perspectives, including cultural relativism, ethical relativism, and universalism. It also explores empirical research on cultural differences in ethical values and beliefs, as well as the impact of cultural and ethical relativism on ethics education. The paper utilizes empirical methods, such as case studies and surveys to examine the problem, provide a more comprehensive understanding of the problem and the potential solutions.

Results, outcomes and implications. The results of this paper show that cultural differences can create significant challenges for ethics education. Cultural and ethical relativism can lead to a lack of consensus on what constitutes ethical behaviour, which can make it difficult for individuals from different cultures to work together effectively. However, the paper also demonstrates that cultural sensitivity and a willingness to engage with different perspectives can help to overcome these challenges. Educators can navigate these differences by developing a culturally sensitive approach to ethics education. This approach involves acknowledging and valuing cultural differences while still teaching a universal set of ethical principles. This can be achieved through promoting cross-cultural dialogue, developing cultural competence among educators and students, and fostering a culture of respect and inclusion. The implications of this paper are significant for ethics education in a globalized world. It highlights the importance of acknowledging and addressing cultural differences in ethical decision-making and education. It also provides practical guidance for educators and students on how to navigate these complexities and work towards a more culturally sensitive and inclusive approach to ethics education. Educators need to adopt a more nuanced approach to teaching ethics that acknowledges and values cultural differences. This approach involves creating a learning environment that is respectful of cultural diversity and incorporates case studies and examples that resonate with students from different backgrounds. It also helps students to understand how ethical principles apply to their own cultural context. Finally, it promotes cross-cultural understanding and empathy, which are essential in today's globalized world.

Conclusions. The problem of cultural differences and the challenges it poses to ethics education are significant but not insurmountable. By recognizing the value of cultural diversity and the need for cultural sensitivity in ethical decision-making, educators and students can work together to create a more inclusive and effective approach to ethics education. This can help to promote greater understanding, respect, and collaboration across cultures, and contribute to a more just and harmonious global community.

Keywords: cultural differences; ethical relativism; ethics education; universalism

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Integrating Ethics and Law in Medical Education: Development, Content and Evaluation of a Three Weeks Bachelor Course

Background. The importance of teaching medical humanities in the medical curriculum is widely acknowledged. Focussing on ethics and law, three challenges exist: (1) how to integrate ethics and law in the curriculum, (2) how to make clear their relevance, and (3) how to assess the humanities. In the medical curriculum of an institution, a 3-weeks course is implemented at the end of the first year of the bachelor, combining contributions from ethics, law and nephrology.

Aim/purpose. To present the course, and to discuss how the course answers the challenges regarding integration, relevance and assessment.

Empirical methods and/or theoretical perspective. Description of the development and content of the course, and students' evaluations.

Results, outcomes and implications. Integration of ethics and law is achieved by a combination of disciplinary lectures on ethics, law and nephrology, and combined lectures. In the combined lectures, the teachers show that ethical and legal issues are ubiquitous in daily practice. In working groups, students discuss combined study assignments. The relevance of ethics and law is emphasized by presenting real-life cases to students and connecting ethical and legal issues to their own experiences. The assessment contains open-ended questions on ethics, law and nephrology, based on patient cases. The evaluations show that students are aware of the importance of ethics and value the integration of humanities with a clinical discipline.

Conclusions. The course provides an example of how the challenges concerning the humanities, i.e. integration, relevance and assessment, can be addressed.

Keywords: medical ethics and law education; medical humanities; integration; assessment

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An Integrated Ethics-STEM Curriculum for Secondary School Students

Background. Ethics education should be integrated into STEM (science, technology, engineering, and mathematics) teaching to effectively prepare students to develop technology responsibly. Rapid advances in technology can greatly benefit society but also have the potential to cause harm if misused due to a lack of understanding of ethics. For example, artificial intelligence (AI) can automate tasks and make decisions faster and more accurately than humans, but if AI is not programmed according to ethical guidelines, it could make discriminatory and harmful decisions towards specific groups of people. However, the current American school system of STEM education is steeply one-dimensional in its focus on technical knowledge; ethics is rarely integrated into math and science curricula, leaving students without the skills to grapple with the multifaceted implications of technology. Moral theories are seldom systematically discussed in classrooms, and ethical reasoning is not taught. As a result, students make ethical decisions based solely on their “moral intuition, often unreliable in complicated or unfamiliar situations. The consequences could be dire given how deeply entrenched technology has become in our daily lives.

Aim/purpose. We have developed a curriculum to fill the gap between STEM and ethics education, introducing students to ethical frameworks and their applications in moral reasoning exercises. The students’ project and studying case are from current practices in the STEM field. The goal is to prepare students for ethical leadership in STEM fields.

Empirical methods and/or theoretical perspective. Structured and written in accessible language, the syllabus teaches ethical theories and moral reasoning skills. It adopts a pedagogical approach in which discussion stimulates students’ thinking; they spend more than half of class time discussing the application of moral frameworks in ethical reasoning. Projects are practical, mimicking real-world applications, and allow students to practice ethical reasoning in the ethical resolution of technological problems. The curriculum has four units. *Unit 1:* Introduction to utilitarianism, deontology, and virtue ethics through analysis of trolley problem and other related ethical dilemmas. *Unit 2:* Ethical Technology Project: Design a programming algorithm to deal with automatic vehicle (AV) collision by using three different moral theories *Unit 3:* Ethical reasoning in depth: Introduction to terms and methods used in applied ethics dealing with issues in private or public life that require ethical judgment. *Unit 4:* Student study of “Predicting Policing” case, analyzing its impact on different groups of people through an ethical lens.

Results, outcomes and implications. We have taught this curriculum to more than 100 students, aged 13–16, and used surveys to evaluate its effectiveness. The results show the teaching has achieved its goal of increasing students’ ethical awareness and improving their ability to analyze and make ethical decisions when they are faced with these challenges posed by technology.

Conclusions. We have developed an effective Ethics-STEM integrated curriculum to improve secondary school students’ ethical awareness and moral decision-making ability. It can be tailored to computer science, mathematics, and engineering curricula to reach more students. Adopting this curriculum will help schools prepare the next generation of scientists, engineers, and citizens to use and develop technology responsibly.

Keywords: STEM; ethics; integration; curriculum

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Teaching Ethics in Vocational Education in Croatia

Background. The subject of *Ethics* was introduced in secondary schools in Croatia in 1995 as an optional subject. Students must choose either *Ethics* or *Religion*. Vocational education in the Republic of Croatia is currently undergoing a reform, and new curricula are being written for general education subjects taught in vocational schools, including the *Ethics* curriculum at level 4.2, 4.1 and special curricula.

Aim/purpose. The aim of this paper is to present the new curriculum for the subject *Ethics* in vocational education at level 4.2, 4.1 and the special curriculum, and their purpose, domains and outcomes and the context in which they were created.

Empirical methods and/or theoretical perspective. Modernization of vocational education implies the introduction of modules instead of traditional subjects. The difference between modules and subjects is in the organization of classes, in which several contents of different subject are combined into one. Modules consolidate and connect learning outcomes. In practice, this implies the cooperation of several teachers of different subjects who teach interdisciplinary. The curricula of general education subjects, including *Ethics*, remain classic, but sets of outcomes can be treated as separate modules, e.g. Human Rights or Sustainable Development. The curriculum is of a semi-open type and prescribes mandatory topics and outcomes, but the teacher decides which optional topics he will cover within the mandatory topics.

Results, outcomes and implications. As part of the modernization of vocational education, three *Ethics* curricula were created: for four-year vocational schools (level 4.2), for three-year vocational schools (level 4.1) and a special curriculum (level 3). The drafts of the curriculum proposals were sent to the Public Consultation and their adoption is expected by the beginning of the 2023/2024 school year. The *Ethics* curriculum consists of two organizational areas – “Moral and ethical reflection” and “Moral and ethical action” – which, with regard to the goals of the *Ethics* course, ensure a well-rounded ethical education. The purpose and organization of each area are presented in the presentation. The central place in the presentation is given to the outcomes and contents of ethical education. The purpose of the course is to connect ethical topics with the world of work, but primarily as basic humanistic education because general education subjects are scarcely represented in vocational schools, and the outcomes achieved in *Ethics* classes can and should provide the basis not only for value orientation, but also for civic, political literacy and development of personal and social competences.

Conclusions. *Ethics*, as one of the few general educational subjects in the vocational education system, plays a key role in the development of a complete person who thinks critically, is able to orientate him/herself in the world and understand him/herself and others.

Keywords: *Ethics* curriculum; ethical education in vocational education; ethics as a school subject; ethics in Croatia

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Medical Students' Opinions on Their Experience of Applying to Research Ethics Committees: A Qualitative Study

Background. Medicine is a multidimensional discipline that offers students broad horizons. It is noteworthy that students have recently turned to scientific research and their efforts to gain a researcher and scientist identity as well as a clinician identity. In this respect, it can be said that research education has become an essential part of undergraduate medical education. One of the most essential elements in this context is to have good qualities is to conduct research following research and publication ethics. Obviously, the ethics committee stage and evaluation are indispensable today's research processes. In this way, both the researches are carried out with an ethical sensitivity and the quality of the studies is increased. Within the scope of the research course at Ankara University School of Medicine (AUSM), each student experiences a research process with their advisors. One of the steps of this research process is the Student Research Ethics Committee (SREC) application process. As far as we know, this SREC which established in 2013 at AUSM is the first and only experience in Turkey. Thus, how students perceive the experience of applying to the ethics committee is an important research topic. In addition, understanding students' experiences by medical educators and medical ethicists is a critical requirement for future programs. This is also important for understanding the relationship (or gap) between theory and practice, which is generally assumed in the field of medical ethics.

Aim/purpose. In this study, it was aimed to describe the relevant experiences of medical school students who apply to the research ethics committee.

Empirical methods and/or theoretical perspective. To describe this experience, a qualitative research was planned to understand the students' lived experiences. For this purpose, focus group interviews will be held with students who have applied to the ethics committee. These interviews aimed to reach the students' experiences in the light of semi-structured questions. The data will be analysed thematically. Ethics committee approval has been obtained for.

Results, outcomes and implications. The research will be completed between January 2023 and May 2023, and the findings will be presented at the Conference in Zagreb.

Keywords: research ethics; ethics education; qualitative study

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Ethics Education between Positivism and Critical Pedagogy

Background. The positivist approach in philosophy and science has been both widely accepted and fiercely debated. Positivism claims that the only acceptable knowledge is the one related to empirical findings, that is, knowledge that is verifiable and value-neutral. This represents an obvious challenge to ethics education. Among the opposing views, the one of critical theory stands out. Critical theory, from its beginnings in the Frankfurt School, aims at revealing the repressive forces that influence social processes, often in subtle ways. Critical pedagogy warns of such forces in education and points to the still present relations of domination and subordination. As a response, critical pedagogy promotes an engaged and responsible teacher who assumes the role of transformative intellectual.

Aim/purpose. In this paper, we will examine the ‘critical’ part of critical pedagogy. Of special interest to us is the role of the teacher according to that approach. Finally, we shall ask whether ethics education is a place suitable for critically oriented teachers or a positivist approach (or some other) is more suitable.

Empirical methods and/or theoretical perspective. Arguments in the paper are derived from critical reading of critical pedagogy, especially regarding the role of the teacher.

Results, outcomes and implications. Contrary to the dominant view that the teacher has to remain uninvolved in meta-educational processes and neutral regarding the materials s/he presents to the students, critical pedagogy promotes an active teacher who participates in the reform processes and actively contributes to the formulation of educational goals and teaching materials. An engaged teacher inspires and engages students. On the other hand, when it comes to ethics education, i.e., education that in substantial part deals with values, one might argue against the critical pedagogy approach. Ethics education thus brings forward the old philosophical question of whether values and facts can be separated.

Conclusions. There is no such thing as value-free ethics education, which represents a challenge to the positivist approach in general and to the teaching process and teacher education in particular.

Keywords: teacher; values; educational goals; education of teachers

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