A Foot in Both Worlds:
Navigating Between a Muslim Health Ethos and Conventional Clinical Ethics

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Overview

- **Conventional clinical ethics:**
  - Common morality and the four principles
  - Compare and contrast to Islamic ethics

- **Analysis of clinical ethical problems:**
  - Four Box method
  - Example: Abortion

- **Role and responsibility of Muslim health care providers in the West.**
The best amongst you are those who are the best in morals. (Muslim)

Righteousness is good morality; and wrongdoing is that which wavers in your soul and which you dislike people finding out about. (An-Nawawi)
Unpacking the Issues

- Muslim HCP in diverse, secular environment
  - Excellence in character
  - Conflicts between duties to religion and institution

- Muslim HCP with non-Muslim patient
  - Conscience (e.g. euthanasia)
    - Does not include refusing to treat or mistreating any group of people.
  - **No compulsion in religion.**

- Muslim or non-Muslim HCP with Muslim patient
  - What is permissible for us to do?
  - How do we choose the best option?
“Conventional” Clinical Ethics

What Does It Mean?
Conventional Clinical Ethics

- **Common morality**
  - “the set of norms shared by all persons committed to morality. ..
  - applicable to all persons in all places...”  
    Beauchamp & Childress, 2009

- **Particular moralities**
  - Non-universal – cultural, religious
  - “a process rather than a finished product”  
    Beauchamp, 2003
  - Allows variation in balancing principles.
Common Morality

- Autonomy
- Beneficence
- Non-Maleficence
- Justice
Autonomy

- “Then give warning; your task is only to warn. You have no control over them” (Al-Ghashiyah, 21-22).

- “Do not force food and drink upon your patients; God, the most glorious and sublime, feeds them and gives them drink.” (Al-Tirmidhi)

- “The blood, property, and honor of each of you are inviolable by the rest of you.” (Al-Bukhari, Muslim)

- “It is only by his free consent that a Muslim’s property can be touched.” (Abu Dawood)
Beneficence

- “To you has come a messenger who is one of you. He grieves that you should perish, and he is solicitous over you. He is compassionate and merciful towards believers” (Al-Tawbah, 128).

- “In their mutual affection, mercy and compassion, Muslims are similar to a single body; whenever one of its organs complains, all other organs are mobilized to support it through wakefulness and fever.” (Muslim)

- “Answer the person who appeals to you, visit the sick, and relieve sufferers.” (Al-Bukhari, Muslim)
Non-maleficence

• “Are you then going, if you are placed in charge, to do evil in the land and sever ties of kinship?” (Muhammad, 22-24).

• “No harm shall be inflicted or reciprocated.” (An-Nawawi #32)

• From maxims of fiqh (qawa’id):
  • Harm must be removed.
  • Prevention of harm has precedence over the acquisition of benefits of equal value.
  • Choose the lesser of two harms.
Justice

- "O you who believe! Stand out firmly for justice, as witnesses to Allah, even as against yourselves, or your parents, or your kin, and whether it be (against) rich or poor: for Allah can best protect both. Follow not the lusts (of your hearts), lest you swerve, and if you distort justice or decline to do justice, verily Allah is well-acquainted with all that you do.” (Al-Nisa, 135)

- God commands you to render trusts to whom they are due, and when you judge between people, judge with justice (Al-Nisa, 58)

- “I have forbidden injustice for Myself and forbade it also for you. So avoid being unjust to one another (Muslim, hadith qudsi)
## Differences in Principle?

<table>
<thead>
<tr>
<th>Principle</th>
<th>Conventional Ethics</th>
<th>Islamic Ethics</th>
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<tbody>
<tr>
<td><strong>Autonomy</strong></td>
<td>Rights-based Primacy</td>
<td>Obligations and duties e.g. no “right to die”</td>
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<tr>
<td><strong>Beneficence</strong></td>
<td>This worldly</td>
<td>Includes after death</td>
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<td><strong>Non-Maleficence</strong></td>
<td>Withdrawal of treatment in patients who are not terminally ill based on quality of life</td>
<td>Quality of life (?)</td>
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<td>Justifies aid in dying</td>
<td>Avoiding harm takes precedence over achieving benefit</td>
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<tr>
<td><strong>Justice</strong></td>
<td>By what criteria? Utilitarian, communitarian, etc. Example: organ transplantation</td>
<td>Primacy over autonomy</td>
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<td>Justice concerns re: transplantation</td>
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Source of Knowledge

Conventional Ethics

- Particular Morality (culture, religion)
- Common Morality (Intellect)
- Principlism

Islamic Ethics

- Principle
- Analogy
- Revelation
- Casuistry
Defining Principles

Maqasid (Purposes)
Protection of:

- Religion
- Life
- Progeny
- Intellect
- Wealth

Qawa’id (Maxims)

- Intention.
- Harm (injury) must be rejected.
- Presumption of continuity (Certainty)
- Hardship necessitates relief.
- Custom and habit.
Analysis of Clinical Ethical Problems

The “Four Box Method”
Example: Abortion
The Four Box Method

- Medical Indications
- Patient Preferences
- Quality of Life
- Contextual Features

Topics
# Medical Indications

## Beneficence and Non-maleficence

<table>
<thead>
<tr>
<th>Conventional</th>
<th>Islamic</th>
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<tr>
<td>• What is the problem?</td>
<td>• Is there hope for recovery or is the patient actively dying?</td>
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<tr>
<td>• What are the goals of treatment?</td>
<td>• Obligation to treat</td>
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<td>• How likely is the treatment to be successful?</td>
<td>• Level of certainty</td>
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<td>• When is treatment not indicated? “</td>
<td>• What is the legal status of the treatments that are available?</td>
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<tr>
<td>• In sum, how can this patient be benefited by medical and nursing care, and how can harm be avoided?”</td>
<td>• E.g.:</td>
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<td>• withdrawal of food and fluids</td>
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<td>• Porcine-based medication</td>
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Patient Preferences

Respect for Autonomy

Conventional

- Has informed consent been achieved?
- Does the patient have decisional capacity?
- If not, who speaks for the patient?
- What are/were his/her preferences?
- Does the patient want to cooperate with treatment? If not, why?

Islamic

- What is the patient’s religious obligation?
- Is it appropriate to leave this decision up to the patient or surrogate?
  - Are they qualified/prepared to make this decision?
  - What is the impact on social justice?
Quality of Life

Beneficence, Non-maleficence and Respect for Autonomy

Conventional

- What are the prospects for a return to normal life; what deficits may be expected?
- Are there biases that might prejudice the provider’s evaluation of the patient’s QOL?
- What are the ethical and practical implications?
- What is the legal and ethical status of suicide?

Islamic

- Is there such a thing as quality of life?
  - All life is quality life.
  - QOL is a function of ‘ubudiyah.
  - QOL is subjective and varies.
- Satisfaction vs. gratitude and patience
- Our bodies and lives belong to Allah, not to us.
## Contextual Factors

### Justice

#### Conventional
- Are there conflicts of interest?
- What are the interests of family members?
- Are there issues of distribution of resources?
- Are there religious or cultural issues?
- Are there public health, legal, or research issues?

#### Islamic
- How do the proposed actions meet objectives of the law (maqasid) and the public good (maslaha)?
- Religion is more than a contextual factor.
Example: Abortion
Medical Indications

• A 25 year old woman has had an ultrasound at 20 weeks of pregnancy and the fetus is found to have a cardiac defect.

• Left untreated, the fetus will be born alive but would likely die days to weeks after birth.

• Surgical treatment of the defect after birth is available and often results in long-term survival.

• Otherwise the pregnancy is normal and does not pose exceptional risk to the mother’s health.
Abortion

Patient Preferences

• A HCP discusses the test results and their implications with the patient; explaining that her options are to continue the pregnancy or to have an abortion.

• The patient states that she is certain that she wants to have an abortion.
Abortion
Quality of Life

- The HCP points out that the child may not have an acceptable quality of life.
  - Multiple surgeries will be needed and they will be painful.
  - Perhaps the child will have permanent physical limitations.

- The patient states that having to care for a sick child will ruin her life.
Abortion
Contextual Factors

• Legally the woman can choose to have an abortion up to 24 weeks of pregnancy in her state. She does not need to consult anyone else.

• Her family is strongly anti-abortion and she plans to tell them that the baby died.

• She is a single mother and one of her biggest concerns is how she would work and support her other child while caring for a sick child.
Islamic Perspective

- What is the moral status of the fetus?
- What is the legal status of abortion?
  - What if the gestational age were 16 weeks?
- What are the patient’s rights?
- Are there exceptions?
- What is the Muslim HCP’s role and responsibility?
Summary

Conventional Ethics

- Fetal moral status defined by political/legal process..
- Maternal autonomy often weightier than rights of fetus.
- Quality of life may play a large role.

Islamic Ethics

- Fetal human status defined by interpretation of religious texts.
- Rights of fetus and maternal obligations outweigh maternal autonomy.
- Life outweighs anticipated quality of life.
Muslim HCP: Secular Society

What are our obligations?
Individual Obligations

- Knowledge of fiqh of medicine
- Excellence
- Oath of the Muslim Doctor
  - Character
    - Compassion, justice, kindness, truthfulness...
  - Humility
Communal Obligations

- Generation and dissemination of knowledge
- Ethical deliberation
- Institution-building
  - Schools
  - Health care facilities
- Participation in the public square
  - Sharing resources vs. proselytizing
An Islamic Model of Science

In the best case, an individual Muslim scientist is aware enough to check the Islamic suitability of his research. The public discourse in the Islamic world is still characterized by the paradigm of reacting...to what has been developed in a different framework, instead of implementing an innate Islamic model.

What Can Each of Us Do?

Make Islam our way of life.

Ask for Allah’s guidance.

Strive to increase our knowledge.

Support each other.

Support communal efforts such as IIM.
References

