References

Bolton, G. (2010). *Reflective practice: Writing and professional development.* (3rd. Ed.) Thousand Oaks, CA: Sage Publications.

Goldberg, L., Ryan, A., & Sawchyn, J. (2009). Feminist and queer phenomenology: A framework for perinatal nursing practice, research, and education for advancing lesbian health. *Healthcare for Women International*, 30(6), 536-549.

Harbin, A., Beagan, B., & Goldberg, L. (2012). Discomfort, judgment, and health care for queers. Journal of Bioethical Inquiry, 9(2), 149-160.

Shatell, M., & Chin, P. (2014). Nursing silent on LGBTQ Health: Rebel nurses provide hope. *Archives of Psychiatric Nursing*, 28, 76-77.

Watson, J. (2010). *Postmodern nursing and beyond*. Edinburgh, Scotland, UK: Churchill Livingstone/WB Saunders.

Watson, J. (2008). *The philosophy and science of caring* (Rev Ed.) Boulder, CO: University Press of Colorado.

Applying Applied Ethics- A Suggestion for How to Move Toward a More Just University

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Almost all of us recognize that we need to do a better job of creating and supporting a more diverse university, both in the student body and the professoriate. We know that we need to be more inclusive, not only in our pedagogy but also in our workplace more generally. It is not, however, obvious how to move from these abstract values through meaningful change to create an institution that lives up to these avowed commitments. Here we'd like to make a pitch for broadening and deepening our engagement with diversity and inclusiveness in our applied ethics courses across the curriculum. Moreover, we believe that we can use this pedagogical practice to motivate and inform effective, progressive change throughout the institution.

On reflection, it is a little strange that we don't always think of diversity and inclusiveness as urgent moral issues that are integral to applied ethics courses. After all, ethics is the study of right conduct. Right conduct must include just conduct, and just conduct must be sensitive to historical wrongs, institutional and social power structures, and oppression (Walker, 2007). In practice, a commitment to justice means that we should attempt to ameliorate injustices or, minimally, not perpetuate them in our personal, political, and professional lives.

Yet, often applied ethics questions are approached as if inherited oppressive power structures are irrelevant to the subject at hand. As one example, the debates over whether to legalize physician assistance with dying have for decades focused on issues of informed consent and the risks of eugenics, without considering how power relations and social position may affect patient autonomy or which social groups may benefit or be harmed from passing or thwarting relevant legal reforms. Disadvantaged communities may have their vulnerabilities exposed and exploited by advocates on both sides. Unfortunately, it is easy to ignore or neatly gloss over the interests of those from communities that have traditionally been marginalized (and indeed the diverse interests within those communities). If justice is our aim, then it is especially important to bring these diverse perspectives clearly into focus.

The dangers are especially acute in the professions, which tend to be historically structured to resist progressive change, despite the best intentions of professionals (or indeed, those teaching or learning a professional practice) (Epstein, 2012; Witz, 1992). Thus it is particularly important that the education of professionals attune them to the moral contours and complexities of the institutions within which they will work, as well as the historical injustices in society at large that need redressing. Students must be given the tools to critically reflect on their own actions and empowered to make thoughtful, ethical decisions. Our students will not only need moral courage and personal integrity, but they will also need to be morally literate and able to build ethics capacity in their communities (cf. Israel et al., 2010).

Ethics capacity-building refers to the creation of the basic knowledge, institutional structures, strategies, and skills that help the members of an institution or a profession live up to their avowed moral values and explicit commitments. This includes things like

familiarity with relevant codes of conduct and ethics review processes, but is not limited to constructing and following good policies. To be effective, written rules need fair, rational, and accountable implementation. Moreover, rules need to be supported by a culture that builds ethics capacity across the institution through supporting critical reflection and open discussion, including engagement with experts when needed.

Moral literacy is both more nebulous and more challenging, albeit no less essential to an applied ethics education. It is the awareness of and ability to interpret the many moral contours of daily life (Krahn, 2009)—an ability to see practical issues through an ethical lens, sometimes referred to as moral perception (Blum, 1994). This is the kind of moral knowledge that one acquires in a humanities education (Nussbaum, 2010). Moral literacy cultivates the moral emotions and challenges us to become responsive beings who consider the importance of what we care about. It fosters the moral imagination and helps us to appreciate the many different ways of being in the world that are not our own (Krahn, 2009). Moreover, to be truly morally literate, one must have not only a sensitivity to difference through exposure to various culturally distinct approaches to ethics, but also knowledge of historical injustices and their many complex effects on the present (Minow, 1990; Young, 1990). Although it is tempting to focus on ethics capacity-building, the deep personal commitments required to ground integrity and moral courage are the result of moral literacy.

In applied ethics education—including ethics capacity-building and moral literacy—the trick is to have our students take what they learn beyond the classroom and into their professional and personal lives. One of us has argued elsewhere that applied ethics courses in professional programmes should not only be taught by those within the faculty, but also by experts who are knowledgeable but external to the field. This adds an important critical dimension and reminds students that the ethical standards to which they are responsible include those of society at large, not simply the norms of their field (Meynell, 2015). Moreover, we need to look for opportunities to get students from disparate fields to interact with each other and discuss their various approaches to ethics, especially in applications where their fields overlap (for instance, business, law, philosophy, medical, and pharmacy students considering the ethics of pharmaceutical research). Finally, we need to model ethical behaviour ourselves throughout the institution. Doing so includes making sure that our own professional practice as professors is inclusive, respectful, and committed to justice (Krahn, 2009).

When our own knowledge of diversity issues is limited, expanding pedagogical practices to include this type of material can *feel* like walking a tightrope. There are the dangers of alienating students both from the cultural mainstream as well as from those groups that we are trying to include (for example, through implicit bias (Brownstein, 2015), and stereotype threat (Inzlicht, 2011)). Admittedly, failures are inevitable. Happily, we have each other as resources, as Dalhousie boasts a wealth of expertise across our various faculties on these issues. With collaboration and coordination, we should be able to build inclusiveness, diversity, and commitment to social justice into our applied ethics pedagogy across the curriculum. The collaboration required to do this would offer an opportunity to reflect on and improve the practices of the institution itself.

References

Blum, L. (1994). *Moral perception and particularity.* New York: Cambridge University Press.

Brownstein, M. (2015). Implicit bias. Stanford Encyclopedia of Philosophy [On-line]. Available: http://plato.stanford.edu/entries/implicit-bias/

Epstein, C. F. (2012). *Women in law*. New Orleans, LA: Quid Pro Books.

Hull, H. G. (2013). Diversity in the legal profession: moving from rhetoric to reality. *Columbia Journal of Race and Law*, 4, 1-22.

Inzlicht, M. (2011). *Stereotype threat: theory, process, and application.* Oxford: Oxford University Press.

Israel, B. A., Coombe, C. M., Cheezum, R. R., Schulz, A. J., McGranaghan, R. J., et al. (2010). Community-Based Participatory Research: A Capacity-Building Approach for Policy Advocacy Aimed at Eliminating Health Disparities. *American Journal of Public Health*, 100, 2094-102.

Krahn, T. (2009). Building a mental health ethics film series, building mental health ethics literacy. J*ournal of Ethics in Mental Health* [On-line]. Available: http://www.jemh.ca/issues/v4n1/documents/JEMH_Vol4_No1_Book_MediaReviews_Building_Mental_Health_Ethics_Film_Series_Apr09.pdf.

Meynell, L. (2015). Ethics inside and out. *Impact Ethics* [On-line]. Available: http://impactethics.ca/2015/05/22/ethics-inside-and-out.

Minow, M. (1990). *Making all the difference: inclusion, exclusion, and American law.* Ithaca: Cornell University Press.

Nussbaum, M. C. (2010). *Not for profit: why democracy needs the humanities.* Princeton, NJ: Princeton University Press.

Walker, M. U. (2007). *Moral understandings: a feminist study in ethics.* (2nd ed.) Oxford: Oxford University Press.

Witz, A. (1992). Professions and patriarchy. London & New York: Routledge.

Young, I. M. (1990). *Justice and the politics of difference.* Princeton, N.J: Princeton University Press.