

forum

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*Conflict: Professional Responsibility Versus Clients'
Rights.* Not long ago, a colleague asked me to present a workshop at Extension Homemakers Conference on the subject of first aid in the home. Several homemakers had expressed

interest in "folk" remedies and procedures that could be used in household emergency situations. My immediate reaction was to suggest a more standard version of first aid based on sound medical principles. Visions of butter being applied to a burn and a wad of chewing tobacco being applied to a cut were conjured up by the mention of folk remedies. The question of professional responsibility came to the forefront in my consideration of what subject-matter content was appropriate.

Those involved in education, whether in the classroom or the community, are faced with many decisions having ethical ramifications. Prominent among the ethical issues faced by educators is paternalism. You could argue that the educational process is inherently paternalistic to the extent an educator's control over content limits the freedom of choice of those being "educated." On the administrative level, policy decisions are frequently imbued with paternalism. Obviously decisions relative to educational content and administrative policy must be made. However, the process by which these decisions are made has a direct bearing on the degree to which the freedom of choice of those being educated is limited.

Participation is a term used frequently, and rather loosely, by "insiders" in the educational process. It's also one of the great tenets of our democratic system. In the case of the educational process, the greater the degree of participation of those being educated, the smaller the potential for paternalism. This principle is easily endorsed, but not so easily achieved.

An educator faces a moral dilemma in deciding to what degree the client group that he/she serves is to participate in the educational process. The tacit assumption exists that one becomes, or is deemed, an educator because of special knowledge or skills possessed in a particular area. Therefore, the educator must establish standards for both the process and content of an educational program. An apparent conflict exists between our moral obligation not to act in a paternalistic manner and our professional obligation as an educator. Resolution of this conflict is often difficult at best and nearly impossible at worst.

A parallel exists between the practice of medicine and that of education. In both cases the receiver of the service interacts, either directly or indirectly, with the giver of the service. In the case of medicine, optimally the client should be helped along the path from illness to health, while in education, the client should progress from ignorance to knowledge.

Of course, this is the theory. In reality, the goal frequently goes unmet in both endeavors. It's expected that the client, in both instances, must surrender some autonomy in return

for the benefits of the process. The important question revolves around just how much autonomy is to be surrendered. Not all recipients of either educational or medical regimens do so of their own volition. Enforced therapy and compulsory education have long been practiced. These blatant examples of captive clients are easily seen. However, the effects of more subtle forms of coercion are frequently undetected.

If you focus on the human in the educational process, individual desires must somehow affect the educator's decision-making process. My example at the beginning points out, only too well, our tendency as educators to ignore the wishes of those we serve. Rarely is this ignoring a result of any malice on our part, but rather paternalism arising from a sincere desire to help or protect another person. How easy it is to use the motive to excuse the act. Unfortunately, the result is a diminishing of the individual's autonomy, and a devaluing of his/her right to participate in the educational process.

To be a true participant in the educational process, an individual must be given more than just an opportunity to select from among several educational programs. In the case of the folk medicine example, an alternative to my initial inclination might be to take the time to find out what folk remedies commonly used in emergency situations are medically sound and develop a presentation around these remedies. Neither my professional ethics nor the right of participation by those whom I educate would be violated.

No perfect resolution exists for the conflict between professional responsibility and individual autonomy that educators face. However, if you're willing to listen to your client group and be open to new educational approaches, the conflict can be substantially reduced. Such responsiveness is entirely consistent with the spirit of Extension education.