

OTAGO BIOETHICS REPORT

Incorporating Bioethics Research Centre Newsletter

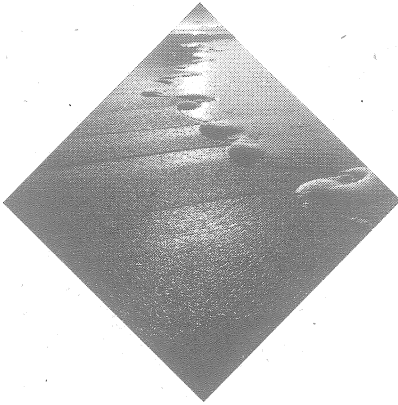
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Guest Editorial

Alastair V Campbell : Pastoral Theologian and Bioethicist



It has been with very mixed feelings that many of us have come to learn of the departure of Alastair Campbell for the University of Bristol. This is perhaps particularly the case for those of us who were involved in the establishment of the Bioethics Research Centre (our original proposal was that it should be known as the Otago Bioethics Centre), and then with enticing Alastair to come here to the Directorship of the Centre as Professor of Biomedical Ethics. There have been so many developments in the Centre over the past few years, that it is difficult to believe that Alastair only took up his position in April 1990.

However, Alastair had been in Dunedin prior to that, having been a Visiting Professor in Biomedical Ethics from September 1986 to August 1987. With hindsight, that 12-month period proved remarkably prescient. Over that period the ground work was laid for most of what has taken place subsequently. His remarkable influence was felt in undergraduate medical education, clinical staff training, postgraduate medical and other professional education, clinical involvement, and community liaison. He was also involved in the early stages of establishing the Bioethics Centre, where he served as a vital encourager and stimulator.

In an article written for the Friends of the Medical School in 1987 (*Medical Ethics - Beyond Pride and Prejudice*), Alastair referred to the quiet revolution in medical ethics. That may be the case, but the revolution on this campus has been far from quiet!

Following this year spent with us, it became important to do what we could to lure him from his home base in Edinburgh.

In time, we succeeded, and the stage was set for the amazing burgeoning and renaissance of bioethics in this University, and indeed nationwide. One of the most remarkable aspects of Alastair's appointment in 1990 was that the medical school added to its clinical staff a member who lacked a clinical medical qualification and, even more anachronistically, was a theologian (even if he was a Scot). And yet for those who knew him, this should have come as no surprise, since one of his strengths has been his expertise in pastoral theology. And it is the pastor in Alastair that has proved so decisive in providing him with an entree into clinical decision-making. His earlier books such as *Rediscovering Pastoral Care* and *Paid to Care? The Limits of Professionalism in Pastoral Care*, demonstrate the relevance of an understanding of pastoral care, and Alastair has himself demonstrated how expertise in one area can be adapted so successfully to another, that is, to bioethics and ethical decision-making.

Alastair Campbell has flourished in an uncharted environment, where most things have inevitably had to be set up for the first time. He has thrown himself into mapping out new paths, and his influence has been felt from the Ethics Committee of the HRC to the Working Party on the Use of Human Genes, from the establishment of third and fourth year bioethics papers to the Master of Bioethics and Health Law, and from being chairperson of the Southern RHA Ethics Committee to being an editorial board member of the journal *Bioethics*.

It is interesting to reflect on how many of these and other activities in which he has been involved even existed six years

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ago. The answer is 'very few'. Alastair's involvement has frequently been seminal, and his influence has always been felt. His time here has truly been revolutionary.

The Bioethics Centre has grown in size and stature, as postgraduate students have realised what it has to offer them, and as visitors from numerous countries have discovered it and learnt of its subtle attractions. The Bioethics Summer Schools have become established, and most of the board members of the International Association of Bioethics were enticed here for a conference and board meeting (a significant achievement for such an isolated location). It is no exaggeration to say that the Centre has become one of the University's notable successes.

While all these frenetic events have been going on, Alastair has continued to publish - books, papers, and reports, as well as giving numerous talks and lectures. The books over the past six years have included *Health as Liberation* (an outcome of his study leave and occupancy of the Tuohy Chair of Interreligious Studies at John Carroll University in Cleveland), and *Practical Medical Ethics* of which he is a co-author (incidentally, this is one of the Centre's most visible contributions to medical ethics, and will shortly appear in its second edition). He is also author of significant chapters in books such as *Bioethics Yearbook*, *Medicine and Moral Reasoning*, *Principles of Health Care Ethics*, and *Dictionary of Christian Ethics*.

Alastair's ever-present smile belies the excitement and pace with which he lives, attributes that have proved crucial in bringing bioethics to its current state of maturity in both this University and this country. It is the hope of those of us associated with the Centre that the foundation which Alastair has so ably helped to lay over the past six years will continue to be built on and that bioethics debate will continue to flourish within the University and beyond. It is also our fervent hope that Alastair Campbell will be able to make just as major a contribution to ethical discourse in Bristol, and that the founding editor of the *Journal of Medical Ethics* will be as entrepreneurial in the late 1990s as he was in the far off days of the late 1970s when the journal commenced and when medical ethics as a serious scholarly discipline was unknown to most of us.

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Article

The Code of Rights: Ten New Commandments for Providers

Ron Paterson*



Health and Disability Commissioner Robyn Stent presents Ron Paterson with a 'Rights t-shirt' to celebrate the making of the Code Regulations.

It's been a long time coming, but New Zealand finally has a code of rights for consumers of health and disability services. Judge Sylvia Cartwright, in her 1988 *Report of the Cervical Cancer Inquiry*, recommended a legislative statement of patients' rights, to protect patients involved in research and treatment in a public hospital. The Code of Health and Disability Services Consumers' Rights 1996, which comes into force on 1 July, goes much further in covering the whole gamut of health and disability services (see accompanying article by Peter Skegg). It spells out 10 rights enjoyed by all health or disability services consumers. Since each right imposes a corresponding duty, the Code is effectively a set of ten 'new commandments' for providers.

The Health and Disability Commissioner, Robyn Stent, has encouraged providers to view the Code as "an opportunity for improvement in quality and effectiveness rather than another burden". NZMA Chair Dr Brian Linehan responded in this vein, welcoming the Code as "an important step in consumer protection and professional accountability". Minister of Health Jenny Shipley, in announcing the making of the Code regulations, described the Code as "easily

understood and able to be implemented effectively". Yet health activist Phillida Bunkle says the Code is "legalistic", and RNZCGP chair Gregor Coster has claimed that "GPs will need to be more defensive in consultation" once the Code takes effect. Are these assessments of the Code justified?

Something old

New Zealand's lack of a code of rights to date does not mean that consumers have previously had no rights. Indeed, the

... consumers are entitled
"to be treated with respect"

very notion of a code suggests the drawing together or 'codification' of existing principles. There is already a significant body of professional guidelines, ethical precepts, and legal rules which govern interactions between providers and consumers. Much of the Code is entirely consistent with established codes of ethics and current law.

Rights 1(1) and 3 state that consumers are entitled "to be treated with respect", and "to have services provided in a manner that respects the dignity and independence of the individual" - words