Ethics in eHealth:
A modern dilemma

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What are ethics and how do they pertain to technology in the rehabilitation and healthcare fields? On a very basic level ethics can be defined in two ways: utilitarian ethics and Kantian ethics (the ideas of Immanuel Kant). Kant argues that human will motivates moral action. However, the will can only motivate itself from a rational foundation (Kant, 1981). Kant's ethics revolve on duty rather than emotions.

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On the other hand, utilitarian ethics is located in the field of 'consequentialist' ethics, where the principles of moral actions are considered to be based on their consequences (Whitehouse & Duquenoy, 2011). A utilitarian considers the possible results of every action and chooses the course that will lead to the most happiness. This is known as the greatest happiness principle (Bentham, 1789). These views boil down to two positions: consideration of human autonomy and respect for others, and a course of action resulting in the greatest benefit. But how do they translate to rehabilitation and technology?

eHealth & Ethics

The main concern in ethics surrounding advancements in healthcare technology stem from the idea of equality. In healthcare the goal is to provide treatment to everyone fairly and without discrimination. Information and communication technology (ICT) is showing no signs of slowing down, which can mean both great advancements in medical science, as well as the possibility of leaving people struggling to keep up. Trading in tried and true methods of rehabilitation for modern technology-based practices can lead to patient alienation, when a client is unable to comprehend the treatment. At the same time, neglecting the effectiveness provided by using modern techniques would be unfair to those patients who would benefit. Finding and maintaining balance in treatment is imperative. Ethics is about promoting benefits and reducing harm (Whitehouse & Duquenoy, 2011).

Keeping in mind the ethical ideal of equality, all patients of a certain practice should be able to access the same resources. Top of the line technology based tools should not be so complex that they become inaccessible and unusable to people who are less technologically savvy. An ethical issue arises when a healthcare worker chooses to favour one type of treatment despite the fact that it alienates a portion of their clientele, whether they are unwilling or unable to grasp the concepts of the technology, thereby willingly choosing to provide less than model service to those individuals.

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Technology need not only pertain to methods of treatment, it can also be implemented into how a business is run. Updating patient databases from paper to electronic records is the simplest way to implement technology into everyday use. The very basis of electronic patient records means they will more than likely be held on a computer system, or database. Depending on the type of healthcare facility you are dealing with, this database could be a small, local set-up, or it could be a larger national or government database that can be accessed from several locations. Such a database would

undoubtedly have high security features and be password protected, but the large scale and heightened access to it (from multiple locations) poses possible confidentiality breaches, and with them, ethical dilemmas.

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The sharing of patient data among or between different healthcare professionals, departments, and other information systems could affect the confidentiality of a patient's data or it could compromise the integrity and timeliness of the treatment of the data (Whitehouse & Duquenoy, 2011). Here, the professional, whether ICT or healthcare, has "a duty to ensure that appropriate measures are in place that may

reasonably be expected to safeguard: the security of electronic records; the integrity of electronic records; the material quality of electronic records; the usability of electronic records; the accessibility of electronic records" (Kluge, 2003).

The many aspects of and uses for technology in the rehabilitation field create just as many ethical questions. The more applied the field, the more specific, focused, and contingent are the particular ethical questions (Whitehouse & Duquenoy, 2011). As with any new development, the pros and cons—for you and your clients—must be intelligently weighed and the chosen outcome should result in the benefit of the most possible people.

When a deliberate decision is made to favour one practice regardless of whether it alienates a group of clients, it poses the ethical question of equality. Does more effective treatment for one group of clients outweigh the lack of treatment for another? Other ethical challenges lie in the possibility that not everyone can safely and effectively participate in technology based treatments. A lack of understanding of the particular technologies involved

could place certain patients at a disadvantage, and could impact on equality and equity generally (Whitehouse & Duquenoy, 2011). Particular concern may be necessary for neurologically impaired populations, some of whom display residual equilibrium, balance, perceptual, and orientation difficulties. It has also been suggested that subjects with unstable binocular vision (which sometimes can occur following strokes, TBI, and other CNS conditions) may be more susceptible to post-exposure visual aftereffects (Wann et al., 1996).

As with any ethical discussion, we are often left with more questions than answers. One way to remain ethically-minded is to always consider every possible outcome. Forethought is the most powerful tool you have when making decisions that affect others. If you are able to keep the greater well-being of your clients in mind, you will be able to incorporate technological treatments into your practice smoothly and ethically.

References for this article available at vracanada.com/media.php