

Ethics at a Glance

Feminist Ethics

Feminist theory is a relative newcomer as a source of ethical theory and represents a diverse range of social and political viewpoints. However, all formulations of feminist theory are concerned with the “private sphere” while also committed to ensuring that the dimensions of politics, economics, and power be included in any ethical analysis. Rooted in the historical devaluation of the female experience in Western philosophy (Jagger, 2001), feminist ethics is predominantly concerned with the imbalance of power and the exposure and elimination of oppression for women and other disadvantaged groups. The term *disadvantaged* refers generally to any group with diminished power in relation to the larger social system. Groups that can be seen to have diminished power within the health care system include women in general, racial and ethnic minorities (both males and females), the elderly, children, the poor, and the disabled.

The basis on which a group might be considered oppressed can vary considerably. For example, in the health care context the strong history of research bias towards white men as research subjects has left women, children, and many racial minorities underrepresented and at risk with respect to many standard medical treatments. In another vein, feminists point out that the laws regulating female reproductive rights remain embedded in legal and economic systems in which the majority of decision-makers are still men. Yet another source of disadvantage is demonstrated by the fact that women and ethnic minorities are more likely to be poor, less educated, and uninsured or under-insured—all of which diminish a person’s power within the health care system.

Feminist ethics does not rely on moral principles per se, arguing that the commonly cited principles are too abstract to be useful in the context of human relationships. Instead, actions are generally viewed in relation to their effect on the quality of relationships among people with an emphasis on considerations of justice and the concept of caring.

Sherwin (1994) provides a number of specific areas of feminist concern with respect to the health care context including the following:

- The inherent inequality of the physician/patient relationship
- The politics of medicine including authoritarian patterns of control and the differential treatment of men and women

- Access to scarce resources by the poor and other medically underserved groups
- The ability of patients to receive and understand the specialized medical information needed to maintain their autonomous decision making
- The unequal burdens of family care giving for women

A general strength of feminist ethics is an emphasis on the importance of considering the context of an individual situation in medical decision-making. Similarly, the emphasis on relationships allows for the realities of emotion and intuition to be factors in our deliberations. On the other hand, as pointed out by Munson (2004), the wide range of feminist views prevents feminist theory from presenting one unified and coherent theory. Additionally, there does not appear to be a method for resolving moral conflicts.

For more on feminist theory and feminist ethics see:

Feminist Theory Website. <http://www.cddc.vt.edu/feminism/enin.html>

FeministEthics.ca. <http://www.feministethics.ca/>

Stanford Encyclopedia of Philosophy. Feminist Bioethics.
<http://plato.stanford.edu/entries/feminist-bioethics/>

Stanford Encyclopedia of Philosophy. Feminist Ethics.
<http://plato.stanford.edu/entries/feminism-ethics/>