“Helpful Lies”

Introduction

The case of Arlene, a previous drug addict and alcoholic, is one that blurs ethical lines between truth and falsehood. As this previous addict processes her new found pregnancy, she claims to have left her addiction habits behind her. Skeptical of these claims, Arlene’s doctor decides to convey to her that her unhealthy habits had given her healthy baby a mild case of fetal alcohol syndrome upon birth, all in efforts to essentially scare Arlene straight. The nurse, who knows the truth behind the doctor’s fable, is caught between a rock and a hard place when trying to decide if she should tell the patient the truth, or maintain the doctor’s lie for the benefit of the patient. Throughout this paper, I will argue that the nurse should, in fact, uphold the doctor’s lie in efforts to do what is ethical in this given situation.

First, we will review why maintaining a professional relationship between the healthcare provider and the patient is arguably a sufficient reason to maintain the lie between Arlene and her healthcare providers. Next, we will review why the argument of failing to respect patient autonomy fails to sufficiently refute the first argument. Next, we will look at why helping to possibly prevent Arlene’s future misuse of alcohol supports the argument for upholding the lie between Arlene and her healthcare providers. Lastly, we will look at why the counterargument of paternalism fails to stand against this final argument.
**Argument 1**

My first argument as to why Arlene should uphold the doctor’s lie is to maintain a *professional and trusting* relationship between the patient and the healthcare provider. This complex and special relationship between a patient and their healthcare provider is the foundation of a life long cycle of active participation in one’s own personal healthcare plan. One looks to their healthcare provider for guidance, excellence, and reliability. If this relationship were compromised, the quality of participation in one’s own health care plan would significantly decrease. This could lead to poor prognoses in the future, as well as unhealthy decision making. It is important for the nurse specifically to maintain this professional relationship as they act as the bridge between patients and doctors. In Arlene’s case, her nurse is the one who helps her keep her sanity while caring for her newborn. If the nurse were to break this trust, Arlene could potentially spiral out of control without the nurse’s guidance. This professional and trusting relationship is so vital to Arlene and her new child’s health that I argue it as the main significant reason why the deception caused by the lie is, in fact, justified.

**Counter Argument 1**

The strongest counter-argument against the claim that “maintaining the professional and trusting relationship between Arlene and her healthcare provider” justifies the nurse’s participation in the lie falls within the dispute that argues doing so fails to respect patient autonomy due to the health care provider’s participation in “deception.” Patient autonomy is the patient’s right to make their own medical decisions without the influence of health care providers’ opinions. Deception in healthcare is the use of health care provider’s dishonesty to influence a patient’s medical decision. The combination of violating patient autonomy through
deception evokes feelings of betrayal, resentment, and even humiliation among patients who are made aware of such dishonesty. One might argue that upholding the doctor’s lie is a practice of deceit, which in this scenario impairs the patient’s right to informed decision making and inflicts emotional trauma upon the patient.

One may further refute that addiction is a disease no different than any other physical ailment – such as diabetes, cancer, etc. – and that it should be treated with the same dignified process as a patient suffering from such disorders (i.e. allowing the patient to make her own informed decisions). This argument supports Arlene’s right to make decisions for herself, no matter how risky they may be. The idea that Arlene has the same right to self determination as any other patient is the driving force behind this counter-argument, urging the idea that the doctor and nurse’s role is to respect these rights for all patients.

Reply 1

While the argument of failing to respect patient autonomy due to the use of deception may seem like a valid counter-argument, I look to Alan Donagan to explain why the act of deception is truly justified in this scenario. Donagan explains that the duty to be honest in the health care field “rests simply on the fact that the respect due to another as a rational creature forbids misinforming him...” While Donagan is emphasizing the importance of truthfulness among healthcare providers and patients, he makes sure to clarify that the receiving party owed such truthfulness is expected to be rational. I argue that Arlene, someone who is suffering from the mental illness of addiction, is incapable of being fully rational at all times due to the imbalance in her genetic makeup that causes her such impulsive and addictive behavior. This only partial rationality Arlene is capable of is what motivates the doctor and nurse to
uphold their lie – to use such an extreme strategy to instill in Arlene a healthy sense of behavior changing fear. Furthermore, the nurse is not so much *blatantly lying* as she is merely *withholding a truth*. While this act still contributes to the act of deception, it is of a lesser severity and, in this case, is justified in Arlene’s plan of care. It is important to keep in mind the health care provider’s efforts to provide what they believe is the best care for their patients, which in this case is exactly what the doctor and nurse are doing their best to accomplish.

In addition to the justification of this deception, I look to the *harm* that would be caused by *revealing the truth* to Arlene as another motivating factor in the nurse’s decision to uphold the doctor’s lie. As explained earlier, the trusting relationship built between the patient and their health care providers is the motivating factor in a patient’s continuation of participation in health care overall. If it were to be revealed to Arlene that her healthcare providers had been lying to her, she would be so upset and disappointed that she could potentially cease participation in her own healthcare altogether. This would not only be harmful to her own well being, but it would be harmful to that of her newborn and any future offspring as well. She may also interpret the health care provider’s deception as unnecessary, deciding that if her drinking and drug habits had not hurt her first baby, they would not hurt any future offspring, leading to increased risk for fetal alcohol syndrome or worse in her future offspring.

**Argument 2**

My second argument as to why I believe Arlene should uphold the doctor’s lie is to help prevent Arlene’s misuse of drugs and alcohol in the future. By allowing Arlene to believe that her poor habits *could* cause harmful effects to her offspring, the nurse and doctor help instill in Arlene a healthy fear of the consequences of her actions. This healthy fear should help motivate
Arlene to make positive lifestyle choices that will not only benefit her, but will benefit her offspring. The direct correlation between the quality Arlene’s choices and the health and well-being of her offspring demonstrate that the influence of the doctor’s lie will have positive outcomes. We can see that the direction Arlene is being swayed in will result in the health and safety of (1) Arelene, (2) her newborn, and (3) any future offspring.

**Counter Argument 2**

The strongest counter argument to the claim that preventing Arlene’s misuse of drugs and alcohol in the future justifies the nurse’s participation in the doctor’s lie falls within the claim that this justification is *paternalistic*. A paternalistic justification is one that overrides the patient’s autonomy *for the patient’s own good*. One might argue that the nurse and doctor “are lying to Arlene for her own good” or that “they are trying to influence Arlene’s decisions so she can make a better life for herself.” This point would argue that the use of paternalism, again, unjustly impairs Arlene’s right to informed decision making.

**Reply 2**

While the doctor’s and nurse’s decision to lie to the patient about the way her habits affected the baby could, in fact, benefit Arlene herself in the long run, they did not tell the lie *for Arlene’s sake*. They told the lie for the health, safety, and overall well being of the *baby* and any *future children* Arlene may produce. This clear distinction of *whom* the doctor was trying to protect is what truly renders the argument of paternalism invalid. This discrepancy is best described by the moral strategy of *non-maleficence*, which is the duty to not cause avoidable or preventable harm.
Furthermore, we can look to John Stuart Mill’s perception of paternalism to justify the nurse’s actions. Recall that paternalism is when a health care provider “overrides a patient’s autonomy for the patient’s own good.” Mill argues that paternalism is justified so long as the intervention meets two conditions: 1.) There is ignorance or impaired capacity for rational reflection among the subject at hand, and 2.) There is a severe magnitude and probability of harm that would result without said intervention. In Arlene’s case, her capacity for rational reflection is impaired by her addiction, and the magnitude and probability of harm to the baby/future children that would result from unresolved addiction is severe. In both events, the doctor and the nurse were acting in favor of the well being of those individuals affected by Arlene’s decision making, and therefore did what they needed to do in order to act ethically as health care professionals.

Closing

As evidence by the previous arguments and counter arguments in Arlene’s case, it is clear that there are not always black and white solutions when it comes to ethical dilemmas in the health care profession. Throughout this paper, we explored the idea of maintaining a professional relationship in justifying the nurse’s participation in the doctor’s lie. Investigating the counterargument of patient autonomy, we see that the risks of telling Arlene the truth were too destructive in comparison with upholding the lie. After recognizing that the upholding of the lie would help prevent Arlene’s abuse of substance abuse in the future, we have come to understand why the argument of paternalism is also invalid under the circumstances that the health care providers made their decisions based on the well being of Arlene’s offspring. As I
conclude my argument, I can confidently say that the nurse’s upholding of the doctors lie was in the best interest of every party involved in the ethically complex situation.