

## Letter to the Editor

**Climbing Ethical Mountains; The Role of Preceptors in Preparing Iranian Biomedical Trainees***Dear Editor,*

Ethics has been an integral part of medical practice throughout its long history, especially when its importance was formally realized and introduced in the form of professional oaths from the Hippocrates on. Ethical (professional) codes of practice and conduct have now a well known academic and in most cases legal standing in different aspects of biomedical sciences. Inter-professional behaviors, research, knowledge production and its practical crystallization in technologies and techniques are the aspects commonly considered in ethical codes. Ethics is now a desirable part of the biomedical research and practice. Due to its basic importance, ethics incorporated into the educational content throughout the academic period and after graduation. Educational settings and biomedical preceptors in line with their social responsibilities are responsible to establish and develop morality in biomedical structures and to ensure the trainees' moral competency before graduation.

Primarily, preceptors have to transfer a true comprehension of ethics-theoretical and practical-to biomedical trainees as a basis for the scientific work. In this respect, other than true ethical values, biomedical trainees need to be educated based on the culture specific sources of ethics other than general guidelines for global ethics and consequently the way(s) they should or should not approach ethical dilemmas, issues, problems, etc. in their professional life. On this account, we cannot expect that making ethically correct professional decisions and realizing and accomplishing moral responsibility in biomedical specific situations to be met competently by trainees who have not been educated and/or trained for practical ethics. In this way, the critical role of faculties should be concerned for at least two purposes: a) establishing a general and supportive ethical climate in educational environment as facilitator of purpose b and b) training ethics formally and supervising ethical behaviors among biomedical trainees.

Weakness or lack of ethical knowledge up to basic standards and lack of needed skills for ethical handling of professional circumstances would render biomedical trainees to judge and approach ethical situations based on "common sense". In this way, ethics might be taught and practiced on the basis of trial and error, and easily could be affected by trainees' personal experiments, their familial and/or social moralities or values, their personal fidelity to morality, their religiosity, and some other common sense related factors. Wordings like "I think ...", "I believe ...", "I see ..." etc. are routine indexes of "common sense" that could affect the biomedical trainees' approach to professional ethical dilemmas negatively. Therefore, different and inconsistent opinions and a spectrum of correct to unjustified actions would institutionalize in practice completely based on trainee's level and correctness of ethical knowledge and their abilities or practical skills required for handling professional ethical issues. For this reason, three policies are often pursued in many countries for preventing challenges of using "common sense": I) establishing professional codes of practical ethics and protecting them from "common sense" by well defining professional principles and values and ethical expectations, II) introducing them as a definite duty of biomedical practitioners

and III) changing ethical state to legal state. Nevertheless, preceptors ought to consider that neither ethics should be reduced to law and legal statements nor legal coverage of ethical requirements is often adequate and nor also we should merely depend upon external controls for having ethical behaviors. Nonetheless, problems of "common sense" could be less and better managed in religious contexts.

Iran is a religious country. Islam is a religion of ethical principles and rules according to the Prophet Mohammad's Hadith: "I have been appointed for the accomplishment of the best honored morality". Muslims are personally and socially bounded by Islamic jurisprudence, including their professional life. Believers are "personally obliged" to search and find an Islamic point of view about the correctness of their activity, by asking Islamic clergymen (*Mojtahids*) and then they are "personally obliged" to practice according to *Mojtahid's* saying (*Fatwa*). Although, this process for extrapolation of "general agreement" is inevitable in Islam, but has three shortcomings: I) it could cause practitioners less think about practical ethical dimensions in detail before and during practice and often restraining themselves to that primary religious permission; II) practical ethical guidelines are less developed so that it would make the ethical atmosphere unclear when practicing, and III) therefore, supervision of ethics would become difficult as practical criteria of ethics is not (well) clear.

Therefore, besides bolstering general religious beliefs, ethics should be thought generally and taught to Iranian biomedical trainees by role models as an empirical knowledge and a set of skills that need to be learnt and closely exercised through different courses during the academic period. We need to determine and define our basic ethical principles based on Islamic values and professional codes of conduct. Then, we need to show our trainees how these principles and codes materialize in practice. In addition, trainees should be aware of maleficent effects of making use of "common sense" in approaching professional events. Moreover, they should learn that *Fatwa* by itself is only a general outline map which is not enough and does not guarantee executing ethics in practice. In fact, implementation process of each *Fatwa* should also be based on practical ethical guidelines.

In this way, it is proposed that faculties encounter Iranian trainees with a bulk of real ethical cases; and let them to be well engaged in the process of solving ethical dilemmas. Trainees need to comprehend the challenges of using "common sense" and be taught correct practical approaches of ethical analysis and decision-making consisting in Islamic values. We also need our trainees and faculties to develop their view towards "professional ethics" as energy, money, and time-consuming activity. In this way, biomedical trainees should be helped to understand that being an ethical (professional) practitioner is like to be a mountain climber; an skillful activity, which other than familiarity with principles and rules, requires some necessary equipments, systematic training, and a vigorous exercise. Providing this understanding, as an educational duty, is to biomedical faculties. They should present themselves as efficient role models.

In summary, biomedical preceptors should develop ethical knowledge in biomedical trainees, provide them with a thorough perception of practical ethics, and enhance their practical skills for approaching biomedical issues inconsistent with professional

standards. Reaching the purpose, it is necessary to plan for educational development of faculties' ethical knowledge and perception, as well as to improve their practical skills for approaching ethical issues. Otherwise, "professional ethics" cannot be rightfully perceived and skillfully inherited to biomedical trainees. Consequently, ethical adequacy and efficacy of our biomedical graduates is not acceptable and reliable in their social and professional interactions. Constant evaluation of ethical adequacy of education with respect to faculties, trainees, structures and professional codes

is suggested.

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