

Towards clarifying healthcare's duty to minimise its environmental impacts

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Background: Healthcare and the environment

Healthcare
contributes
7% of **Australia's**
total greenhouse
gas emissions

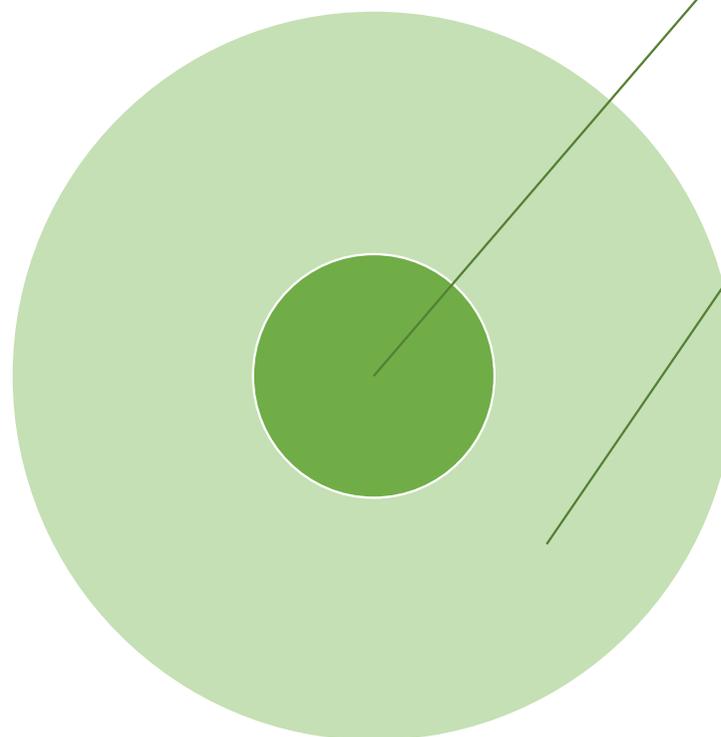


Background: Mapping work in green bioethics

Existing work to defend and define healthcare's environmental responsibilities as a matter of justice:

- Focus on “negative” duties—minimizing harms—over “positive” duties
- The **duty to minimize healthcare's environmental impacts**
 - Content
 - Often defined in terms of **minimizing carbon emissions**
 - Limits:
 - **Soft exceptionalism**
 - Non-exceptionalism

Background: Mapping work in green bioethics



Duty to
minimise
healthcare's
environmental
impacts

Philosophical
grounds

My arguments

1. Different philosophical grounds → different understandings of the content and limits of the duty to minimise healthcare's environmental impacts that should inform definitional debates
 - The case of different understandings of **justice**
2. Reasons may exist for preferring certain understandings of the duty over others

Different ways to ground the duty

Axes of justice

- Social justice
 - What is owed to humans, eg health (generally doesn't include consideration of nature)
- Environmental justice
 - What we owe to humans in relation to nature: calls for avoiding and addressing the harmful and unequal effects of climate change and environmental degradation on the ability of current and future humans globally to develop and function
 - Includes climate justice
- Ecological justice
 - What humans owe to nature

Different ways to ground the duty

Ontologies

Anthropocentric to Cosmological

- *Anthropocentrism*
- *Sentientism*
- *Biocentrism*
- *Ecocentrism*
- *Cosmological*

Individualistic to Collectivist/Holistic

- *Individualism*
- *Communitarianism*
- *Collectivist/Holistic*

Discontinuous Temporality to Continuous Temporality

- *Discontinuous Temporality*
- *Continuous Temporality*

Different ways to ground the duty

Axis	Social Justice		Environmental Justice			Ecological Justice	
Underlying Ontology (not exhaustive)	Anthropocentric	Anthropocentric	Anthropocentric	Anthropocentric	Cosmological	Biocentric	Ecocentric
	Individualistic	Communitarian	Individualistic	Communitarian	Collective	Individualistic	Collective
	Linear time	Linear time	Linear time	Linear time	Non-linear time	Linear time	Linear time
Duty Limits							
Duty Content							

Variations in positions on duty limits

- Limits with no exceptions
 - **Example:** Individual humans should not be pushed below a threshold level of health in order for healthcare to minimise its environmental impacts
 - Consistent with soft exceptionalism
- Limits with some exceptions
 - **Example:** Members of human communities can, at times, be pushed below a threshold level of health in order for healthcare to minimise its environmental impacts for the sake of near future generations of the community
 - Softer exceptionalism
- No limits
 - **Example:** Individual humans can be pushed below a threshold level of health in order for healthcare to ensure its resource use stays within the planetary boundaries. That is to ensure the long-term stability and integrity of the human civilization or of Earth's systems
 - Consistent with non-exceptionalism
- Relational limits

Variations in positions on duty content

- What environmental harms must be minimised
 - Most grounds for the duty call for minimising more than greenhouse gas emissions
- Whether offsetting is a permissible way to uphold the duty

Conclusions

1. There are various ways to understand the duty to minimise healthcare's environmental impacts beyond reducing carbon emissions and up to the point of negatively impacting patient health
2. (Reasons may exist for preferring other understandings of the duty)



Questions?

Thoughts?

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How far should healthcare go to minimise its environmental impacts?

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In progress work

- Social justice
 - Anthropocentric, individualistic, linear time
 - Duty limit, soft exceptionalism
 - Interests of current local patients over the interests of existing and future people globally and of nature
- The following actions (amongst others) to uphold the duty would be **impermissible** if they mean pushing patients below a threshold level of health:
 - Not offering certain forms of healthcare or services for environmental reasons
 - Offering less effective and/or higher cost healthcare or services with lower environmental impacts
 - Procuring goods and services (eg energy, pharmaceuticals, medical equipment, office equipment, and food) with lower environmental impacts for a higher cost
 - Building new or retrofitting healthcare infrastructure with lower environmental impacts for a higher cost

In progress work

- Ecological justice
 - Ecocentric, collective, linear time
 - No duty limit, non-exceptionalism
 - Healthcare should do all it can to ensure its resource use stays within planetary boundaries
- The following actions (amongst others) to uphold the duty would be **permissible** even if they mean pushing patients below a threshold level of health:
 - Not offering certain forms of healthcare or services for environmental reasons
 - Offering less effective and/or higher cost healthcare or services with lower environmental impacts
 - Procuring goods and services (eg energy, pharmaceuticals, medical equipment, office equipment, and food) with lower environmental impacts for a higher cost
 - Building new or retrofitting healthcare infrastructure with lower environmental impacts for a higher cost