

Notes for the NZ Psychological Society of NZ Conference Ethics Panel, 6th September 2018, Auckland

Key Points

1. Bioethics has been, in the main, reactive not proactive and so we often see a time lag between the presentation of new issues and the proposing of solutions. The hope is that bioethicists will need to become increasingly creative and imaginative as they work to shorten the time-gap between problems and solutions.
2. The increasing tendency to opt for personal health interventions is going to be challenging for health professionals as solutions are potentially fashioned for only those who have the means and knowledge to seek out the latest health pathways. The question is: how do we balance the incentives to seek biomedical advances while possibly increasing inequity and inequality in the health system and elsewhere?
3. Answering the question 'Who do we treat' will create increasing ethical tensions as resource pressure due to changing demography and technological forces requires us as a society to re-examine our intervention priorities and models of resource distribution. The serious issue here is the ever-shortening window of opportunity to reduce health inequality.
4. Maori ethics and data governance will need to further develop its own pathways and conceptual structures as the 'parallel play' paradigm moves towards its logical end-point and Maori get increasingly intolerant of the continuing and persistent waves of colonisation in periods of reducing resources.

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