Ethics Recruitment and Role Awareness: What We're Hearing

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Earlier this year, CHA surveyed ministry ethicists to determine the current makeup of ethicists across the ministry and to evaluate progress with recruitment and education to fill needed positions within ethics roles. From similar surveys completed in 2008 and 2014, CHA directed its focus to ensuring both qualified and prepared ethicists are entering the field to take the place of those retiring. Efforts were put in place to bring awareness to ethics careers, increase recruitment to the field, and align preparation for incoming ethicists. The purpose of the 2018 survey was to verify if the landscape was continuing the previously identified trends and to provide additional directions for next steps based on the results.

In his 2015 summary, Ron Hamel outlined key observations related to the comparison of data from the 2008 and 2014 surveys. Several of his key observations pointed to an aging body of ethicists across the ministries, a shift in educational backgrounds of upcoming ethicists, and the changing responsibility of ethicists as a reaction to changes in health care.¹ Since that time, CHA and its member organizations have increased efforts to address the recruitment and education challenges. This summary of the 2018 survey will:

- 1) Highlight the current makeup of active ethicists across Catholic health care
- 2) Identify continued challenges based on comparisons to previous surveys
- 3) Outline current CHA initiatives focused on recruitment and education

CURRENT ETHICISTS IN THE FIELD

CHA asked 88 member ethicists to complete the survey; 50 ethicists responded, giving a 56.8 percent response rate. Of the ethicists who responded, the majority are lay (91.7 percent), Roman Catholic (88 percent), males (60 percent) who hold a Ph.D. (70.8 percent) from a Catholic institution (75 percent) and consider themselves active in their faith (92 percent).

The age of the ethicists is uniformly spread as 18.4 percent are 30-39; 26.5 percent are 40-49; 16.3 percent are 50-59; 24.5 percent are 60-69; and 14.3 percent are over 70. No respondents are under the age of 30. More telling than the current age is the number of years ethicists plan to continue to work, with 32.6 percent planning just 1-5 more years as an ethicist. Within 15 years, 67.5 percent of respondents no longer

plan to work as ethicists. This, coupled with the fact that 54.8 percent of ethics positions have no succession plan, is concerning considering the future demand for positions. Currently, 61.5 percent of ethicists say they do not have adequate staffing to effectively handle ethics needs within their organizations. The concern with adequate staffing stands to be exacerbated as ethicists are required to take on more responsibilities and increased geography due to a shrinking number of candidates for open positions.

While the majority of current ethicists received doctoral training (70.8 percent), today the majority of organizations require only a master's degree (73.2 percent) in bioethics, (43.9 percent), theology (39 percent) or other similar field (48.8 percent) to hold entry level ethics positions. A combination of education and work experience is the determining factor for hiring new ethicists with the majority (55 percent) of organizations.

As current ethicists prepared for their roles, the majority completed a fellowship or internship (59.2 percent) in the area of ethics (87.5 percent) most often at a hospital (62.3 percent). Today, only one third (33.3 percent) of organizations offer a fellowship or internship to prepare future ethicists and many organizations are or may be willing to hire someone directly out of graduate school (86.5 percent). However, surprisingly many organizations (69.5 percent) require at least 2 years of previous work experience prior to being hired for an ethics position. This data suggests a disconnect between requirements to attain an ethics position and opportunities to attain experience as a new graduate within our organizations.

CONTINUED CHALLENGES

Comparison of the 2018 survey to previous surveys provides an avenue to evaluate if recent efforts across the ministry have positively impacted the foreseen challenges with education and recruitment of ethics positions. The challenge of aging ethicists continues to remain apparent with a growing cohort of ethicists over the age of 70 (12 percent increase) and a shrinking cohort of ethicists under the age of 30 (4.5 percent decrease). In comparing the future working plans of ethicists, we continue to face the challenge of replacing a large cohort of ethicists who plan to retire in the next 15 years, but the 2018 survey revealed slight growth in the number of ethicists who plan on working for 16 - 30 more years (2.2) percent increase). Our organizations continue to struggle with succession planning for ethics positions and the survey comparison indicates organizations have declined in this area (5.2 percent decrease).

While the challenge of awareness of ethics roles and training of new ethicists is not new, several limitations for preparing new ethicists still exist. Ethicists point to financial resources and time as the two biggest barriers. Many organizations feel increased pressure to cut unnecessary costs and FTE positions, which negatively impacts the ability to establish a fellowship or internship. Furthermore, greater than half the ethicists feel there is not enough staff to address the current ethics demands, which negatively impacts the time necessary to mentor and train prospective ethicists. Other listed limitations include a lack of necessary foundational knowledge in both the clinical and philosophy/theology education to begin a fellowship or internship.

As the need to fill ethics positions still exists, ethicists reported several effective ways to attract and recruit ethicists to Catholic health care. The most frequently listed ideas include: 1) working with schools (high schools, undergraduate, and graduate) to raise awareness of the field of health care ethics earlier in the student's curriculum; 2) ensuring and touting the strong pay practices for ethics positions; and 3) recruiting ethics roles within the organization by encouraging interested staff members. These and other ideas are the ongoing focus of CHA and its member organizations and the survey confirms the current efforts are in the right direction.

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ENDNOTES

¹ Ron Hamel, "Ethicists in Catholic HealthCare: Taking Another Look," Health Care Ethics USA 23, no. 1 (2015) 34-44.

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