Bioethics Mediation: A Guide to Shaping Shared Solutions

Nancy N. Dubler and Carol B. Liebman

United Hospital Fund of New York, 2004, 230 pp., $39.95

This book works. The authors appreciate that whole lives intersect in hospital clinical decision making: patients, family members, administrators, physicians, and other care givers. Life histories, long in the making, bump into one another amid stress. When interests are mutually shared, treatment decisions proceed calmly. It is sometimes a different story in the compressed decisional time frames common to life and death choices. Apparent ethical dilemmas often disguise conflicts that might be ameliorated through professional mediation. Timely interventions, on the other hand, promote productive consensus about the correctness of treatment among involved parties.

Bioethics Mediation limits its scope to in-house mediators who are also hospital employees, explaining the time-saving advantages and the ethical disclosures that support their effectiveness. Chapter 2 briefly describes the unique nature of this kind of mediation, and how it differs from formally enlisted third-party arbitration.

Nancy N. Dubler is a bioethics director at Montefiore Medical Center and a professor at Albert Einstein College of Medicine, Bronx, NY. Carol B. Liebman is a clinical professor at Columbia Law School, New York City, where she is director of the Columbia Law School Mediation Clinic. Their collaboration updates a 1993 work by Dubler and Leonard Marcus. Informed by a sociological perspective on the hospital environment, they help their reader-students to observe the human element. Good writing and editing make this a fine introduction. Basic tools of ethics consultation are reviewed, but the authors are mainly interested in teaching mediation skills. There are tactful reminders about physicians' responsibilities overall, and the consideration owed them in the mediation process.

Bioethics Mediation is made up of five sections, beginning with a basic explanation of mediation in a hospital setting. This section is followed, first, by a practical guide to bioethics mediation, then by case analyses, role plays, and annotated transcripts of bioethics mediation role plays. A certain amount of repetition makes for a book longer than was perhaps necessary, but it also allows some chapters to stand on their own.

The authors do not pretend that formal mediation is appropriate for every difficulty. "A successful mediation may occur when the mediator acknowledges that the situation is not appropriate for mediation and that there are well-accepted legal rules and ethical principles that must be applied" (p.77). Just getting people to admit that a conflict exists among them requires skill. "Conflict tends to be expressed by the parties through positions, insults, generalities and threats . . . . The mediator's job is to help the parties refocus so they can discuss their interests, communicate productively, focus on the issues that should be resolved, generate options, and evaluate proposals" (p.39).

Dubler and Liebman's intended audience includes hospital ethics committees, care consultants, and clinical professionals. They present a commonsense outlook for aspiring mediators, and for those seeking to participate effectively in mediation. Future studies will tell us whether imposed solutions or mediations "produce patient care plans that are comfortable for all" (p. 218).

The index notes only half of the textual references to religious beliefs. Various narratives mention beliefs so that decision makers will account for convictions affecting communications or compliance regarding a particular patient or family. Legal and moral issues specifically related to hospitals with church-based missions are beyond the purview of this particular book.

Fr. Timothy L. Doherty, STL, PhD
Ethicist/Coordinator
Diocese of Rockford
Rockford, IL