

April 2025

The Ethics Dispatch

“Functioning as our better selves leads to better outcomes for patients and everyone.”

-- Tarris (Terry) Rosell, PhD, DMin, HEC-C

Hot Topic

Bioethics, Public Health and Executive Orders

As you are surely aware, the intersection of public health ethics and executive policy has become increasingly complex. From a bioethics standpoint, it is clear that many recent executive actions raise important ethical concerns -- particularly where they appear to conflict with principles like beneficence (doing good) and justice (ensuring fairness and equity). These tensions, especially in how they affect marginalized communities, highlight the critical relationship between bioethics and public health ethics.

Public health ethics is grounded in principles that promote the well-being of all individuals, emphasizing health equity, justice and fairness. The core mission of public health is to protect and improve the health of entire populations, ensuring that health resources are distributed equitably and that all people, especially those from marginalized backgrounds, have access to the care they need.

Transgender Health

As noted in an article published on [HealthAffairs.org](https://www.healthaffairs.org), certain executive orders violate these ethical principles, particularly in the case of transgender healthcare. [Executive Order \(EO\) 14187](#), which seeks to restrict gender-affirming care for minors, exemplifies the collision between executive power and ethical public health practice. (Valdiserri, Holtgrave, Scofield, 2025).

Gender-affirming care has been shown to improve mental health outcomes for transgender youth, reducing rates of depression and anxiety while increasing overall life satisfaction. This evidence is widely accepted by leading health organizations, including the American Medical Association and the American Academy of Pediatrics. However, the administration's directive to restrict access to such care is framed as “junk science,” (EO 14187, 2025) dismissing the substantial body of research supporting gender-affirming treatments.

This not only reflects a dangerous disregard for scientific evidence but also perpetuates harmful stigma against transgender and gender-diverse individuals. By blocking access to this essential care, EO 14187 exacerbates the already dire mental health crisis faced by transgender youth, who experience disproportionately high rates of depression, anxiety and suicidal ideation. This directive stands in direct violation of the principle of beneficence -- the obligation to act in ways that promote the health and well-being of

individuals.

The policy also undermines the principle of justice, which mandates that health policies should promote equity, particularly for groups facing significant health disparities. Transgender youth, already marginalized by society, are disproportionately affected by the barriers created by such executive actions. Rather than alleviating health disparities, this executive order deepens them, creating further barriers to necessary care for one of the most vulnerable populations in the U.S. The ethical responsibility to ensure equitable access to healthcare is clear, and policies that worsen these disparities are ethically indefensible.

Beneficence, Justice and Beyond

Ethical concerns extend beyond individual healthcare to the broader concept of inclusivity and engagement, another cornerstone of public health ethics and bioethics. Ethical public health practice requires that policies and programs be developed in consultation with and informed by the communities they are meant to serve. Community engagement is not just a formality but a crucial element of effective public health interventions. As argued in the HealthAffairs.org article,

[l]ooking through the lens of public health ethics, the [January 20th EO](#) that characterizes DEI programs as ‘radical’ and ‘wasteful,’ calling for their termination, is wrong-headed. A recent twenty-two year [systematic review](#) of DEI efforts recommended that outcomes should be standardized to better assess the long term consequences of DEI trainings. The authors of this systematic review emphasized the need for improvements in DEI efforts; they did not call for their eradication. If we fail to train practitioners and policy makers about the role that DEI plays in effective public health actions, we run the risk of miscommunication, misunderstood priorities, misplaced programs, wasted resources, and adverse public health outcomes. (Valdiserri, Holtgrave, Scofield, 2025).

Ultimately, the ethical principles of beneficence and justice are central to public health practice and should inform policies that affect vulnerable populations. Certain executive actions -- such as those related to transgender healthcare and Diversity, Equity and Inclusion (DEI) initiatives -- raise important ethical questions that have the potential to impact the well-being and equity of marginalized communities.

Moving forward, it is essential for policymakers to carefully consider ethical principles in their decisions, ensuring that public health policies are inclusive, evidence-based, and designed to support the health and equity of all individuals, particularly those most at risk. The future of public health depends on a commitment to justice, fairness, and the well-being of all populations.

Sources:

[When Executive Directives And Public Health Ethics Collide | Health Affairs](#)

[Protecting Children from Chemical and Surgical Mutilation – The White House](#)

[Ending Radical And Wasteful Government DEI Programs And Preferencing – The White House](#)

[A systematic review of diversity, equity, and inclusion and antiracism training studies: Findings and future directions - PubMed](#)



[Remembering Tom Beauchamp - The Hastings Center](#)



[Tennessee joins multi-state effort to deny medical treatment based on religious beliefs - WPLN News](#)



[A new model for medical funding will save lives - CapX](#)



[Spare Parts or Saviour Sibling? The Birth of an Ethical Dilemma - Washington and Lee University](#)

Case Study: Obligation to Report Self-Harm

Ms. Taylor Plans Medical Aid in Dying

Ms. Taylor is a 56-year-old woman diagnosed with stage IV bladder cancer, which has metastasized to her bones. Her prognosis is poor, with an estimated life expectancy of only a few months. She is fully aware of the severity of her condition and has come to terms with it. While understandably saddened by the limited time she has left, her emotional response remains within normal limits. She has chosen to receive home hospice care to manage her symptoms and maintain comfort during her remaining time.

During a recent visit with her physician, Dr. Zeebs, Ms. Taylor disclosed her intention to pursue physician-assisted death (PAD), also known as medical aid in dying (MAID). Although she currently resides in a state where MAID is illegal, she retains legal residency in Portland, Oregon – where the practice is permitted – and has already obtained the necessary medication. Ms. Taylor shared that she plans to take the medication on the anniversary of her wedding, the happiest day of her life, to peacefully pass away while reflecting on cherished memories of her late husband.

However, a new law recently enacted in Ms. Taylor's current state mandates that healthcare providers must report any patient expressing intent to engage in self-harm or assisted death. This law explicitly includes cases like Ms. Taylor's. As a result, Dr. Zeebs is legally obligated to report her plan to state authorities, who would likely intervene by confiscating the medication and hospitalizing Ms. Taylor for the remainder of her life, thereby preventing her

from accessing MAID.

Given the ethical and emotional complexity of the situation, Dr. Zeebs has sought guidance from an ethicist.

Ethical Musings

When Is It Just to Defy a Law?

What makes a law just? When is it ethically defensible to disobey one? These questions have long fueled debate in the study of law and ethics. They're often framed in terms of following the *letter* of the law versus the *spirit* or *intention* behind it. To follow the letter of the law means applying it strictly as written -- regardless of its moral consequences. In contrast, focusing on the intention of the law asks whether the law is fulfilling its stated purpose or ethical goals.

Legal Positivism Versus Natural Law

The idea that the morality of a law lies solely in its existence is commonly associated with legal positivism. As John Austin famously stated, "[t]he existence of law is one thing; its merit and demerit another. Whether it be or be not is one enquiry; whether it be or be not conformable to an assumed standard, is a different enquiry." ([Stanford Encyclopedia of Philosophy – Legal Positivism](#)) That is to say, from a positivist perspective, laws are to be followed simply because they are laws. Their moral worth is irrelevant. If a law exists, it is valid and binding—even if it is ethically questionable.

This view stands in direct contrast with natural law theory, which asserts that morality is derived from the nature of the world and of human beings. For instance, St. Thomas Aquinas argues that rationality is what defines moral law, positing "the rule and measure of human acts is the reason, which is the first principle of human acts." ([Internet Encyclopedia of Philosophy – Natural Law](#))

If a person believes that a law is morally wrong or unethical, how should they navigate these two conflicting frameworks? Should they follow the law simply because it exists, or should they follow their own conscience?

Centrality of Free Will

In the medical field, the conflict between legal obligations and personal morality often surfaces through conscientious objection -- the belief that a healthcare provider's ethical convictions should take precedence over institutional or legal mandates. Reflecting this stance, some states have proposed legislation that protects such objections. For instance, Idaho lawmakers Sen. Bjerke and Rep. Skaug introduced House Bill 59, known as the *Medical Ethics Defense Act*, which asserts:

Health care providers shall have the right of conscience and, pursuant to this right, shall not be required to participate in or pay for a medical procedure, treatment, or service that violates such health care provider's conscience.

This proposed law would grant healthcare professionals the legal right to decline providing certain medical services -- even if those services are standard practice or legally mandated -- based solely on personal moral or ethical beliefs.

Underlying this legal movement is a key principle of natural law theory: the centrality of free will. According to this tradition, individuals must be free to act according to reason and conscience. Aquinas argues that legitimate governance treats citizens not as passive subjects but as rational participants in a shared moral order and "[t]he central case of government [is] the self-

government of a free people... and the central case of law is the coordination of willing subjects by law which... treats those subjects as partners in public reason.”([Stanford Encyclopedia of Philosophy – Natural Law Theories](#))

What Is Justice?

From this perspective, if a man-made law obstructs a person’s ability to meet fundamental human needs or fulfill moral duties -- needs rooted in the natural order -- it loses its ethical legitimacy. Consider something as basic as eating: it is a moral neutral grounded in necessity. If a law were to restrict access to food, it would not simply be a legal issue; it would be a violation of natural law, and thus unjust. Likewise, when legal mandates compel individuals to act against their conscience, natural law theory would argue that such mandates must be questioned -- or even resisted.

Ultimately, the tension between legal positivism and natural law theory underscores a deeper question: should legality dictate morality, or should morality inform our obedience to the law? In areas like medicine, where ethical convictions directly affect care, this debate becomes especially urgent. When a law conflicts with conscience or impedes fundamental human needs, it is not only reasonable -- it may be necessary -- to question its legitimacy. Justice, after all, is not merely about following rules, but about upholding what is right.

Ethics Committee Consortium Resources

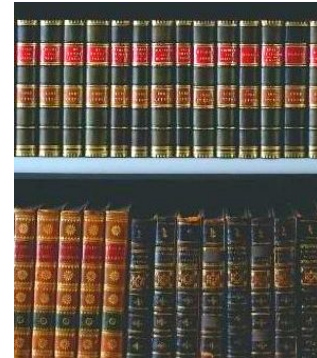
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