The Conscience Project

Indiana University School of Medicine
Conscience Project

Conscience Programs

- Conscience Research
- Conscience Teaching
- Conscience Sensitive Treatment
Conscience Research

- Conscience in Advantage
- Conscience in Adversity
- Conscience and Profession
Conscience in Advantage

• Subjects: Children and Adolescents
  – ages 5-17
  – early and middle 1980’s
  – cross-sectional study
  – screened for psychopathology

• Measure: Stilwell Conscience Interview (SCI)
Conscience in Advantage (cont’)

• Outcomes
  – Developmental Stages scored and analyzed
  – Domains characterized
    • five in all, one with three sub-domains
  – Evolution of Conscience Theory
    • including concept of bedrock (intrinsic) values
On the Value of Theory

THE VALUE OF A NEW PSYCHOLOGICAL THEORY DEPENDS ON HOW FAR IT EXTENDS THE RANGE OF PSYCHOPATHOLOGICAL BEHAVIOR THAT CAN BE EMPATHICALLY UNDERSTOOD

Leslie Brothers, Harvard Medical School
Mental Health Letter, 6:5. 1989
The Punitive Superego
The 'Enron' Conscience
Conscience Theory

- invariant hierarchical stages
- interdependent developmental domains
- intrinsic values
Conscience Stages
Stage I: Externalized Conscience

Age 6 and Under
Externalized Conscience #2

Age 7
Stage II: Brain or Heart
Conscience

AGES 7 -11
Stage II: Brain Conscience

Age 11
Stage II: Heart Conscience

Ages 12-13
Transitional Conscience

Age 11
Stage III: Personified Conscience

Age 10
Stage III: Personified Conscience

#2

Age 12
Stage IV: Confused Conscience

Ages 14-15
Stage IV: Confused Conscience

#2

Age 15
Stage IV: Confused Conscience

#3

Age 15
Stage V: Integrated Conscience

Ages 16-17
Stage V: Integrated Conscience

#2

Age 17
Königsberg

BRIDGES OF KÖNIGSBERG
Domains of Conscience
Domain: Conscience Concept

Intrinsic Value: Meaning
Domain: Moralized Attachment

Intrinsic Value: Connectedness
Domain: Moral Emotional Responsiveness

Intrinsic Value: Balance
Domain: Moral Valuation

Intrinsic Value: Worth
Domain: Moral Volition

Intrinsic Value: Freedom
Conscience and The Brain

Conscience Drawing
14 year old boy

"My conscience is a voice the sounds like that talks to me and tells me what is right and what is wrong."
Antonio Damasio’s Conceptualization of Conscience

Kinds of Consciousness

– the non-conscious *proto-self*
– core consciousness
– extended consciousness
– conscience
Two-Factor Theories of Behavioral Inhibition

- moral inhibitions as conditioned avoidance responses
- anxious arousal even without the socializing agent
- behaviors reducing anxiety are reinforced
Two –Factor Theories (cont’)
How do children learn to inhibit aggressive impulses

Child A is aggressive to Child B
Child A is punished by a censuring agent (parent, teacher, peer)
Child A contemplates aggressive action to another child
Child A acquires anticipatory fear of punishment
Child A inhibits the aggressive impulse
Child A's anticipatory fear dissipates.

Heritable Factors

• putative temperamental factors
  – “inner tension” (Dienstbier)
  – “body dysphoria” (Kagan)
## Beyond Two–Factor Theories

The Correspondence Between Conscience Domains and Cloninger’s Temperament & Character Factors

<table>
<thead>
<tr>
<th>Cloninger et al.</th>
<th>Stilwell et al.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Novelty seeking</td>
<td>Moral Engagement</td>
</tr>
<tr>
<td>Harm avoidance</td>
<td>Moral Emotional Responsiveness</td>
</tr>
<tr>
<td>Reward dependence</td>
<td>Moral Attachment</td>
</tr>
<tr>
<td>Persistence</td>
<td>Moral Volition</td>
</tr>
<tr>
<td>Self-directedness</td>
<td>Moral Emotional Responsiveness, Moral Attachment, Peer-derived and Authority-derived Valuation.</td>
</tr>
<tr>
<td>Cooperativeness</td>
<td></td>
</tr>
<tr>
<td>Self Transcendence</td>
<td>Conceptualization</td>
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</tbody>
</table>
Conscience and Brain Pathways
Conscience and Neurotransmitter Systems

[Diagram showing a decision tree with 'right' and 'wrong' branches, with options such as 'will help someone', 'will not make you angry', 'be clean', and 'brain processes report'].

Conscience and Neurotransmitter Systems

DOPAMINE

HIGH
- Increase motor activity,
- Aggressive
- Extroverted
- Reward driven

LOW
- Decreased motor activity
- Non Aggressive
- Low interest in others
- Poor Motivation

Conscience and Neurotransmitter Systems

<table>
<thead>
<tr>
<th>NOREPINEPHRINE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>HIGH</td>
<td>LOW</td>
</tr>
<tr>
<td>Good concentration</td>
<td>Inattentive,</td>
</tr>
<tr>
<td>Selective attention</td>
<td></td>
</tr>
<tr>
<td>Conditions easily</td>
<td>Conditions poorly</td>
</tr>
<tr>
<td>Internalizes values</td>
<td>Internalizes poorly</td>
</tr>
<tr>
<td>Easily becomes anxious</td>
<td>Low anxiety</td>
</tr>
<tr>
<td>Overly inhibited</td>
<td>Underinhibited</td>
</tr>
</tbody>
</table>

Conscience and Neurotransmitter Systems

SEROTONIN

HIGH
Good impulse control
Low aggression

LOW
Poor impulse control
High aggression,
Increased motor activity

Conscience in Adversity #1

- **Subjects:** Youth Inpatients
  - psychiatric hospital stays typically 6-9 months
  - late 1980’s

- **Measures:**
  - SCI conducted for research separately from clinical assessment
  - DSM diagnoses from interdisciplinary diagnostic conferences
  - maltreatment experiences characterized
  - putative psychobiological correlate

- **Psychopathological interference as well as developmental stage scored**
  - scoring and analysis completed for boys only
Maltreated Boys
In A State Psychiatric Hospital

• Boys maltreated early in life were delayed in domains in which boys spared early maltreatment were not. They had troubles:

a) utilizing feelings of anxiety and mood to inhibit antisocial behavior,
b) utilizing reparation and healing to reinstate moral-emotional equilibrium after wrong-doing,
c) perceiving attachment figures as caring about and affirming their moral goodness,
d) processing values related to respecting and feeling protected by authorities, and
e) developing skills and attitudes related to becoming a responsible person now and in the future.
Conscience in Adversity #2

Conscience Drawing
17 year old girl
Conscience in Adversity #2

- Subjects: Youth Residents
  - in residential and group homes
  - inclusion of adolescent sexual offenders as special study group
  - 1999-2001

- Measures:
  - conscience interview techniques and modified SCI incorporated in routine clinical assessment
  - DSM-IV diagnoses
  - maltreatment experiences and other adverse life events characterized
  - conscience sensitive psychiatric evaluations scored with global assessment of psychopathological interference in conscience
  - independent dimensional measure of psychopathology
  - scoring and analysis in process
Malevolent Cricket

Dear E joguin,

There is a little grin inside me that pulls
alloyer that makes me bad when I'm bad. The grump
his wife says, 'I hope that's all gone'.
The reason I pick on you is because his wife nurses on my brains.

5/18

His wife The Other Bad guy

Sports the Bad guy

...
Externalized Conscience

Conscience Drawing
sides one and two: something right and something wrong

Conscience Drawing
"Breaking Windows-sun going down when I broke a window."

Conscience Drawing
"Before: the way I used to be -stole car stereos and speakers."

"Today"
Externalized Conscience #2

Good

A+

?

Bad

4

Conscience Drawing
11/9/99
14 year old boy

"Bad" represented with a gang symbol, a gun and a blunt
"Good" with a grade report and a question mark
Other Examples

Conscience Drawing
15y boy

'here’s the mosque
and here’s the jail.
I have to choose.
My brother helps me
sort things out.'

Conscience Drawing
11y old boy

"happy side: me living with my kid"
"bad side: me smoking weed"

Conscience Drawing
16y old girl

"My conscience looks
like me It tells me what will
happen if I do something."
Touched by an Angel

Conscience Drawing
14 y old girl
"Like on each shoulder

tells you different things to do...
This is not my conscience-
My mind tells me what to do."

Conscience Drawing
14 y old boy

Conscience Drawing
13 y old boy
"Some little evil dude
that thinks about bad stuff
Tells me to do things that are wrong."
Slow Progress ???

50% = 100% not Wrong

50% not doing things I'm supposed to
Losing weight

Wrong doing things I don't suppose
Frightening body

Hating you
Amoral Emotional Responses

Conscience Drawing
Adolescent girl
"Good: nice and bright, halo, jewelry, belt, rings, and a buckle on her jeans, [her] hair is fixed. [She has] bright blue eyes, shining with joy, proud.

"Bad: dark, gloomy, ugly, dresses fall black, lipstick for, horns like the devil."
"I'm kinda in the middle—more on the good side."

Conscience Drawing
15y girl
"I drew a flower that shows all my feelings, some days I feel different things. This flower shows all my feelings and how much I feel them. The middle is the one I feel the most, the big petals are the feelings I feel more often, and the small petals are the feeling I feel the least."
Conscience in Adolescent Offenders

Conscience Drawing
16y boy

"My conscience on my shoulder
telling me what is right
and wrong to do."

Conscience Drawing
17y boy

"The closed flower is like when
I do something—not good
or bad—just anything.
The open flower represents my
conscience being open to
talking about the things I do.
The blackened petals represent
the bright affect I have on people.
I am nice and glowing.
The tears off the last represent
that sometimes I
have sad moments."
Conscience in Natural Catastrophe

Spitak, Armenia
Conscience in Armenia

• Subjects: Youth Victims of Natural Catastrophe
  – Armen Goenjian et al.’s study of survivors of 1988 earthquake in Armenia
  – comparison of youth in Yerevan and Spitak

• Measures: included SCI structured version translated into Armenian

• Adolescents in Spitak showed
  – advanced development of conceptualization of conscience
  – many had marked pathological interference

Conscience in Armenia: Brain & Heart Representations

Yerevan

Girl from Spitak
Conscience in Armenia: Personified Stage

Spitak
Conscience in Armenia: Confused Stage

My conscience is confused, unorganized

Yerevan
Conscience in Armenia: Valuational Domain

Yerevan
Conscience Sensitive Clinical Work

• Conscience Sensitive Interview Techniques
• Conscience Sensitive Assessment
• Conscience Sensitive Treatment Planning
• Conscience Sensitive Treatment
Conscience Sensitive Interview Techniques (CSIT)

- conscience sensitive adaptation of existing initial assessments
- non-judgmental questions that uphold conscience centered professional values
  - regard for the person of conscience and moral meaning making
  - regard for moral connections and disconnections
  - regard for moral emotional responses
  - regard for moral autonomy
  - regard for the value maker, keeper and seeker in the value triangle
The Valuation Matrix

"Do engage in acts harmful to one's self."

Abide

Ignore

Best Reasons

Base Motives
CSIT (cont’):

- Psychiatric Benchmarks of conscience activity using the valuational matrix
  - violating behaviors and domination by survivalist valuation
  - valuation and substances
  - valuations and sexuality
  - suicidality and the suspension of life affirming valuation
CSIT (cont’):

- formal inclusion of SCI questions in the psychiatric evaluation
- where should they go?
  - Personal history?
  - Religious history?
  - Mental Status Examination?
Conscience Sensitive Assessment
# Psychopathological Interference Configured According to Conscience Domains

<table>
<thead>
<tr>
<th>DOMAIN</th>
<th>CBCL ITEMS</th>
<th>YSR ITEMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Authority</td>
<td>22. Disobedient at home</td>
<td>22. I disobey my parents</td>
</tr>
<tr>
<td>Derived</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Valuation</td>
<td>43. Lying or cheating</td>
<td>43. I lie or cheat</td>
</tr>
<tr>
<td></td>
<td>67. Runs away from home</td>
<td>67. I run away from home</td>
</tr>
<tr>
<td></td>
<td>72. Sets fires</td>
<td>72. I set fires</td>
</tr>
<tr>
<td></td>
<td>81. Steals at home</td>
<td>81. I steal at home</td>
</tr>
<tr>
<td></td>
<td>82. Steals outside the home</td>
<td>82. I steal from places other than home</td>
</tr>
<tr>
<td></td>
<td>101. Truancy, skips school</td>
<td>101. I cut classes or skip school</td>
</tr>
<tr>
<td>DOMAINS</td>
<td>CBCL ITEMS</td>
<td>YSR ITEM</td>
</tr>
<tr>
<td>-------------------------</td>
<td>------------------------------------------------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>Peer Derived Valuation</td>
<td>15. Cruel to animals</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>16. Cruelty, bullying or meanness to others</td>
<td></td>
</tr>
<tr>
<td></td>
<td>37. Gets in many fights</td>
<td>37. I get in many fights</td>
</tr>
<tr>
<td></td>
<td>57. Physically attacks people</td>
<td>57. I physically attack people</td>
</tr>
<tr>
<td></td>
<td>97. Threatens people</td>
<td>97. I threaten to hurt people</td>
</tr>
</tbody>
</table>
## Psychopathological Interference Configured According to Conscience Domains (cont’)

<table>
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<tr>
<th>DOMAIN</th>
<th>CBCL ITEMS</th>
<th>YSR ITEM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moral Emotional Responsiveness</td>
<td>26. Doesn’t seem to feel guilty after misbehaving</td>
<td>26. I don’t feel guilty doing something I shouldn’t</td>
</tr>
<tr>
<td></td>
<td>31. Fears he/she might do something bad</td>
<td>31. I am afraid I might think or do something bad</td>
</tr>
<tr>
<td></td>
<td>35. Feels worthless or inferior</td>
<td>35. I feel worthless or inferior</td>
</tr>
<tr>
<td></td>
<td>52. Feels too guilty</td>
<td>52. I feel too guilty</td>
</tr>
</tbody>
</table>
## DSM-IV Criteria Relating to Domains of Conscience

### Axis I: Post-traumatic Stress Disorder (PTSD)

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Conscience Domain</th>
</tr>
</thead>
<tbody>
<tr>
<td>C - 5 feeling of detachment</td>
<td>Peer-derived valuation</td>
</tr>
<tr>
<td>C – 6 restricted range of affect</td>
<td>Moral attachment</td>
</tr>
<tr>
<td>C – 7 sense of foreshortened future</td>
<td>Moral emotional responsiveness</td>
</tr>
<tr>
<td></td>
<td>Self-derived valuation</td>
</tr>
</tbody>
</table>
## DSM-IV Criteria Relating to Domains of Conscience (cont’)

### Axis I: Major Depressive Episode

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Conscience Domains</th>
</tr>
</thead>
<tbody>
<tr>
<td>A – 7 feelings of worthlessness</td>
<td>Self-derived valuation</td>
</tr>
<tr>
<td></td>
<td>excessive guilt</td>
</tr>
<tr>
<td>A - 8 indecisiveness</td>
<td>Moral volition</td>
</tr>
<tr>
<td>A – 9 suicidal ideation</td>
<td>Self-derived valuation</td>
</tr>
</tbody>
</table>
### DSM-IV Criteria Relating to Domains of Conscience (cont’)

**Axis I : Dysthymic Disorder**

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Conscience Domains</th>
</tr>
</thead>
<tbody>
<tr>
<td>B - 4 low self-esteem</td>
<td>Self-derived valuation</td>
</tr>
<tr>
<td>B – 5 difficulty making decisions</td>
<td>Moral volition</td>
</tr>
<tr>
<td>B – 6 feelings of hopelessness</td>
<td>Moral valuation</td>
</tr>
</tbody>
</table>
Axis I Syndrome: Conduct Disorder

Criterion

A: repetitive and persistent pattern of behavior in which basic the rights of others or major age appropriate societal norms and rules are violated

Conscience Domains:

Authority-derived valuation

Peer-derived valuation
Conscience Sensitive Diagnosis

Axis I:

Neglect of Child (Victim)
Physical Abuse of Child (Victim)
Suspected History of Post Traumatic Stress Disorder, Untreated
Parent–Child Relational Problem
Depression Not Otherwise Specified
History of Conduct Disorder, Adolescent Onset, resolved
Disruptive Behavior Disorder, Not Otherwise Specified
Amid The Cogwheels
Current Practice Parameters for Psychiatric Assessment of Children and Adolescents

III.E. 9: Parental Interview: Developmental History: Conscience and Values
   a. Assess conscience in terms of:
      (1) Age-appropriate development
      (2) Specific areas of excessive harshness, laxness, or conflict;
      (3) Effectiveness in helping child conform to expected family and community norms;
   b. Religious or ethical concerns;
   c. Goals and future aspirations:
      (1) How realistic;
      (2) How congruent with family’s values and expectations

Conscience Sensitive Treatment (CST)

- Format
- Loci
CST (cont’): Format

- Individual Therapy Format
- Family Therapy Format-undeveloped
- Psycho-educational Group Therapy Format
CST (cont’): Loci

- inpatient (individual therapy)
- partial hospitalization program (group therapy)
- intensive outpatient (group therapy)
- outpatient (group therapy)
- residential (group therapy)
Individual Therapy

Acute Psychiatric Hospitalization

- Conscience sensitive psycho-education
- Conscience sensitive suicidality schema
- Preparation for Family Therapy
Critical Components of Informed Consent

- General information
  - Name of the medication and its classification
- Doses
- Schedule of administration
- Purposes
  - Disorder and symptoms to be targeted
  - Expected benefits of medication

Critical Components of Informed Consent

- Work-up to be performed
  - Physical examination
  - Blood tests
  - Other laboratory tests
  - Observations
- Risks and side effects
  - Common side effects
  - Serious side effects (e.g., life-threatening, irreversible)
- Methods of observing and intervening

Critical Components of Informed Consent

- Cautionary uses
- Pregnancy
- Use with other medication
- Safety recommendations
  - Hazardous activities -- use of motor vehicles
- Limitations
  - Unpredictability of effects in this patient
  - Little direct knowledge of effects in children
  - Possible unforeseen consequences of any medical intervention

Conscience Sensitive Informed Assent & Refusal

• For the Psychiatric Interview
  – an inquiry into personhood: the life of thinking, feeling, valuing, choosing and doing
• For any therapeutic interventions
  – how disorder $x$ threatens personhood; what disorder $x$ can do to the life of thinking, feeling, valuing, choosing and doing
  – specification of healing values which will govern the therapeutic process
• For pharmaco-therapeutic interventions
  – how treatment will ameliorate the disorder
  – what risks treatment poses and how these will be managed.
Conscience Sensitive Informed Consent, Assent, & Refusal

Psychopharmacotherapy and the threat to autonomy

‘Will my medicine make me be good?’
Conscience Sensitive Informed Consent, Assent & Refusal

Carlotta Learns About Her Medicine

a work in progress
A Conscience Sensitive Approach to Suicidality in the Continuum of Care
Preparation for Family Therapy
The Triple Pass Genogram

• teaching the symbolic notation
• first pass: biological connections
• second pass: emotional connections
• third pass: moral connections
• intergenerational transmission of values
Triple Pass Genogram

Biological connections

- male
- female
- union
- issue
- deceased

Moral connections

Emotional connections

- strong bond +valence
- disconnection
- conflicted
Psycho-educational Group Therapy (CST-Group TX)

- seven interchangeable modules
- closed groups may lengthen the number of sessions for each module
- in open groups, modules are each one hour
- participant observation from youth care workers
Staff Conscience
CST-Group TX (cont’):

• process issues are made part of the examination of conscience

• modules are designed according to domain
  – each module has a unique question set to be covered in discussion
  – each module has a specific therapeutic task to be completed
  – each module has an intrinsic value to be identified
CST-Group TX
Foundation Work

- personal matters: thoughts, feelings, values, choices, behaviors
- circle of confidentiality (respect for autonomy)
- participation (contributory value)
- regulation of self disclosure (respect for privacy)
- respect for other’s disclosures
CST-Group TX 1st Module

An Exercise in Moral Imagination
CST-Group TX: 1st Module
The Question Set

• general and personal definitions of conscience
  – written down before any discussion
  – alternative interrogatories and directions according to cognitive level
  – assurances that responses will not be treated as incorrect
CST-Group TX: 1st Module
The Conscience Drawing

• The Image of Moralized Consciousness
  – requested prior to any discussion of the written definitions
  – associations encouraged
CST-Group TX: 1st Module
The Composite Conscience

- draws from the language of the group
- identifies the domains of conscience
- may require supplementation
CST-Group TX: 1st Module
Extraction of the Intrinsic Value

- Conceptualization of Conscience/ Moral Imagination as a moral psychological domain
- **Moral Meaning Making** as the intrinsic or bedrock value associated with the domain
- The Allure of Value
CST-Group TX: 1\textsuperscript{st} Module

Intrinsic Value: Meaning

• strengthening the domain
  – exercising moral imagination for achieving moral health (e.g. Shelton)
  – opportunities to identify moral issues (Right vs. Wrong)
  – opportunities to identify moral dilemmas (Right vs. Right)
CST-Group TX: 2\textsuperscript{nd} Module
The Question Set

- early moral memories
- who has cared the most about your conscience?
- moral mandate attributions
CST-Group TX: 2nd Module
The Moralized Time-Line

• retrieving memories of disapproval
  – (depression makes it easy)
• retrieving memories of approval
  – (depression makes it hard)
• changes in how appraisals are appraised
  – (overvalued devaluations)
• attaching importance to an attachment figure
  – (changes in the lifespan)
CST-Group TX: 2nd Module
Triple Pass Genogram

Reconstruction of the triple pass genogram for the group
CST-Group TX: 2nd Module
Extraction of the Intrinsic Value

- Moralized Attachment
  - a moral psychological domain

- Connectedness
  - the intrinsic or bedrock value associated with the domain
CST-Group TX: 2nd Module
Intrinsic Value: Connectedness

• strengthening the domain
  – strengthening an existing connection
    • when the spatio-temporal connection is intact
    • when the spatio-temporal connection is lost
  – reckoning one’s moral worth to another person of conscience
  – establishing a new moral connection
CST-Group TX: 3rd Module

Bad
Regret, Ashamed, Naughty

Good
Smile, Thanks, Sorry
CST-Group TX: 3\textsuperscript{rd} Module
The Question Set

- Moral Emotional Responsiveness
  I:
  - internal anxiety,
  - mood,
  - psycho-physiological changes
    - somatic localization of conscience activity
    - may have been introduced in first module.
  - characterizing the moral emotional response
    - duration
    - intensity
    - blunted responses
CST-Group TX: 3rd Module
Discrete and Moralized Emotions
How Are You Feeling Today?
How Is Your Teenager Feeling Today?

A Parent's Guide to the Facial Expressions of the Species

- Mellow
- Bummed
- Stoked
- Funky
- Dumped
- Fried
- Rattled
- Bored
- Torqued
- Snarky
- Spacy
- Amped
- Wounded
- Surly
- Cheesed
- Crushed
- Queasy
- Tired
- Jiggy
- Whatever

...For The Adolescent
CST-Group TX: 3rd Module
Discrete and Moralized Emotions (cont’)

• pictured emotions identified in association with right-doing by oneself, by others
• pictured emotions identified in association with wrong-doing by oneself, by others
Empathy:

- resonating with the biology of emotion and listening to its biography
- initial exercise in empathy
  - ‘How do you tell when someone is hurt?’
  - ‘What happens inside you when you recognize harm done?’
- regulation of empathic arousal
- guilt as an empathic response
Rings of Glaucon

• ‘What happens inside when you’ve done something bad?’
  – First Ring of Glaucon: ‘if no one knows?’

• ‘What happens inside when you’ve done something good?’
  – Second Ring of Glaucon: ‘if no one knows?’
CST-Group TX: 3rd Module
The Question Set (cont’)

• Moral Emotions II:
• external anxiety
  – ‘What happens (on the) outside when you’ve done something good?’
  – ‘What happens (on the) outside when you’ve done something bad?’
CST-Group TX: 4th Module
The Question Set

• Moral Emotions II:
  – reparation and healing
    • reparative mechanisms
      – forgiveness
      – gratitude
    • healing measures
  • defense mechanisms
CST-Group TX: 4th Module
The Letter of Apology

• may be an exercise in moral imagination
• identification of critical elements
  – identification of harm done
  – ownership of harm
  – expression of regret
  – amendatory proposal
• identification of extraneous and vitiating elements
CST-Group TX: 3rd & 4th Modules

Extraction of The Intrinsic Value

• Moral Emotional Responsiveness
  – a moral psychological domain

• Equanimity/Harmony/Balance
  – the intrinsic or bedrock value associated with the domain.
Intrinsic Value: Balance

- Re-evaluation of moral emotions

Q: What is the nature of emotional well-being?

A: Full range of human emotion
   Congruence of human emotions
   Adaptive regulation of human emotion
The Worth of So-called Negative Emotions

- good even if they don’t feel so good
- guilt tolerance (it is a form of empathy after all)
- guilt induction vs. guilt as punishment
- under- and overvaluation of moral emotionality
  – “he keeps smiling when I punish him”
  – “she doesn’t have remorse”
- suspension of moral reactivity
CST-Group TX: 3\textsuperscript{rd} & 4\textsuperscript{th} Modules
Intrinsic Value: Balance (cont’)

• strengthening the domain
  – developing a repertory of reparative strategies
    • seeking forgiveness and being forgiving
    • restitution
    • gratitude
  – healing strategies
    • solitude
    • time for reflection
CST-Group TX: 5th Module
The Question Set

- do’s and don'ts
- intergenerational transmission of family values revisited
- attributions in value keeping
- derivations in value making
Rings of Glaucon Revisited:

- Do’s and Don'ts
- Absent (Dis-)Approval
...or, in the case of scrupulosity
CST-Group TX: 5th Module
The Valuation Triangle

- authority
derived/attributed
- peer
derived/attributed
- self
derived/attributed
CST-Group TX: 5\textsuperscript{th} Module
Shifts in the Triangle Across the Lifespan

The developmental dynamics of value keeping, seeking and making:
CST-Group TX: 5th Module
The Valuation Matrix

• Psychiatric Benchmarks
  – valuations and sexuality
  – valuation and substances
  – violating behaviors and domination by survivalistic valuation
CST-Group TX: 5th Module
The Valuational Matrix (Cont’)

• eliciting best moral reasons
  – to abide by the moral mandate
  – to ignore the moral mandate

• baser motives
  – to abide by the moral mandate
  – to ignore the moral mandate
CST-Group TX: 5th Module
Moral Dilemma Resolution
CST-Group TX: 5th Module
Intrinsic Value: Worthiness

- the allure of value is motivational
  - but akrasia is also a possibility
- closing the motive-reason gap in behalf of moral growth
- elevating moral dialogue and ethical discourse
  - crediting others with best reasons
  - suspending moral reactivity to the baser motives of others
CST-Group TX: 6th Module
Moral Volition

- Autonomy
- Agency
- Advocacy
CST-Group TX: 6th Module Task

• successful resistance to an antisocial impulse
• overcoming resistance to a prosocial impulse
CST-Group TX: 6th Module
The Question Set

• awareness of growth and change
• enlarging the ambit of conscience
CST-Group TX: 6th Module
Intrinsic Value: Freedom

- accountability
- matching privilege with responsibility
CST-Group TX: 7\textsuperscript{th} Module

- Developmental Delays
  - disruptive behavior disorders
  - attention deficit hyperactive disorder
- Psychopathological Interferences
  - depression
  - post traumatic stress disorder
  - obsessive compulsive disorder
  - substance abuse
Conscience Teaching

Moral Pyscho-education
Conscience Sensitive Medical Education
Conscience Centered Professional Ethics
Some of Our Recent Conscience Concepts & Images
Recent Conscience Images (cont’)

The Conscience Celebration

Rachel & The Seven Bridges of Conscience-Berg
Conscience Centered Professional Ethics

Conscience Centered Medical Ethics
Expanding Understanding of Ethical Decision-Making

Introduction to Clinical Medicine I
Faculty Development Seminar Series
December 2000
12:30 to 4:30 pm

12:30 Lunch
12:45 Introduction & Objectives
1:00 Linking Personal to Professional Conscience
1:30 The Conscience Interview
2:15 Conscience Domains
2:50 BREAK
3:00 Conscience & Traditional Bioethical Principles
3:35 Application in Clinical Medicine
(case discussion)
4:10 Utility in ICM I
4:20 Wrap-up
4:25 Evaluation
4:30 Adjourn

The Conscience Project
Health Ethics Leadership Program
Indiana Health Ethics Network

Dept of Medicine
Indiana Univ School of Med
1061 West 10th Street
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CONSCIENCE CENTERED PSYCHIATRIC ETHICS
A Course

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VALUES

* INTRINSIC
the value $x$ has in itself apart from whatever it leads to or its further consequences

* INSTRUMENTAL
a function of the intrinsic value to which $x$ will lead

* ORIGINATIVE
value newly introduced into the world, not presaged by or fully counted in previous instrumental value

* CONTRIBUTORY
the difference $x$ makes so that the slack of its absence would not be taken up by other factors such that the same value is produced anyway

Conscience Centered Theory of Ethics
Some Propositions

• Valuation exists.
• Valuation has intrinsic value.
• Valuation is an irreducible inner state within a complex of attachment, cognition, emotion and volition; hence these other irreducible, interdependent inner states have at least instrumental, probably intrinsic and possibly (in the case of volition) originative value.
• Conscience formation is one means by which an organic unity of these developmental domains is attained, in virtue of which they are said to be moralized. The question exists: are there other means by which an organic unity of these domains may be attained without moralization?
• Choosing a life with conscience has originative value in virtue of which the other domains have intrinsic values.
• The choice of conscience involves accepting certain values which govern but in turn are shaped by the practice of virtues.
Conscience Centered Theory of Ethics (cont’)

• These values are:
  • Meaning
  • Connectedness
  • Harmony
  • Autonomy
  • Worth
Conscience Sensitive Medical Education

Traditional Approaches

• bioethical principlism
• application of ethical theories
  consequentialism
  deontology
  virtue based
• casuistry
Bioethical Principlism

Principles of Medical Ethics

beneficence

non-maleficence

autonomy

justice

Consequentialism

CONSEQUENTIALISM
(OLDER TERM : TELEOLOGY)

The view that whatever values an individual or institutional agent adopts, the proper response to those values is to promote them.¹

Consequences alone should be taken into account when making judgements about right and wrong.²

Some Types:

Some identify utilitarianism with consequentialism, some say it is a kind of consequentialism, some say the term ‘utilitarianism’ should be reserved for consequentialism with the assumption that only pleasure (alternatively: well-being or preference satisfaction) has intrinsic value.

Some advise that the distinctions should be ‘utilitarian vs. non-utilitarian’ and ‘consequentialist vs. nonconsequentialist.’³

Hence deontology is nonconsequentialist, virtue-based ethics are consequentialist (invoke teleology), but may or may not have a utilitarian component.

Deontology

Moral theories according to which the rightness or obligatoriness of an action is not exclusively determined by the value of its consequences.¹

"The end does not justify the means."

Virtue Based Ethics

VIRTUE ETHICS

Ethical theory in which the concept of virtue is fundamental, in contrast to rule- or duty-based moral theories. ¹

Also uses terms such as ‘integrity’ or ‘character’.
What does a good person do in real life situations?
The Virtue-theorist does not necessarily reject utilitarianism or rights-based theories, but believes these theories ignore ordinary moral life involving character. ²

SOME TYPES:

Medicine has a moral tradition in which physicians lives can achieve a certain unity or ‘narrative’. They can look backwards (and forward) and see how their lives made (make) a difference.

Moreover, medicine has its internal ‘practices’ which allow for intrinsic pleasure beyond its extrinsic rewards: the deft surgical hand, the perspicacious diagnosis, the esteem of a great teacher by students... ³

Contemporary representatives:
Elizabeth Anscombe
Alasdair MacIntyre
Phillipa Foot

Kidder’s Moral Dilemmas

KIDDER’S
MORAL DILEMMAS

TRUTH VS.
LOYALTY

INDIVIDUAL
VS. COMMUNITY

SHORT TERM
VS. LONGTERM

JUSTICE VS.
MERCY

Kidder’s Resolution Principles

KIDDER’S RESOLUTION PRINCIPLES

1) ENDS-BASED: “WHAT'S THE GREATEST GOOD?”

2) RULES-BASED: “WHAT IS THE HIGHEST RULE THAT SHOULD BE FOLLOWED?”

3) CARE-BASED: “WHAT WOULD WE HAVE DONE UNTO OURSELVES?”

Values Intrinsic to Conscience

Intrinsic (Bedrock) Values

- connectedness
- harmony
- meaning
- autonomy
- worth
Conscience Values and Bioethical Principlism
A presence that disturbs me with the joy
Of elevated thoughts; a sense sublime
Of something far more deeply interfused,
Whose dwelling is the light of setting suns….