# Ethics model comparison

My interest lies in the combination of healthcare and IT. Therefore, I sought out models that are widely used in each field. For healthcare, I found the model by Beauchamp and Childress (2020), and for IT, I found the PAPA model by Mason (1986b). Healthcare and IT are deeply intertwined, but both have distinct central subjects that their ethical frameworks address. In healthcare, the central subject is the patient's body and life, while in IT, it is the patient's information or privacy. I found it interesting to see how the models would differ. First, I will state the principles each model abides by. After that, I will discuss their similarities, differences, and my personal preference.

## Core Principles

The core principles for Beauchamp and Childress (2020) are:

* Autonomy – Respect for a patient's right to make informed decisions.
* Beneficence – Acting in the best interest of the patient.
* Non-maleficence – "Do no harm"; avoiding causing unnecessary harm or risk.
* Justice – Ensuring fairness in the distribution of resources and care.

The core principles for Mason (1986b) are:

* Privacy: What information about oneself or one's associations must a person reveal to others, under what conditions, and with what safeguards? What information can people keep to themselves and not be forced to reveal?
* Accuracy: Who is responsible for the authenticity, fidelity, and accuracy of information? Similarly, who is to be held accountable for errors in information, and how is the injured party to be made whole?
* Property: Who owns information? What are the just and fair prices for its exchange? Who owns the channels, particularly the airways, through which information is transmitted? How should access to this scarce resource be allocated?

## Similarities between the models

In a sense, Property and Autonomy are comparable. Autonomy over one's body allows a patient to have the final say regarding the treatment of their body or mind. Property allows the patient to have the final say on the information gathered concerning their body. Both models present a similar argument, suggesting that the final decision-making power rests with the patient.

The models also discuss fairness, which relates to the amount of care received or the value of the information gathered. In my opinion, this is a very valuable aspect of the models. It makes healthcare professionals and IT professionals aware of the potential impact and importance of their choices.

## Differences

The models differ in that the IT model is more focused on the awareness of how information is treated and who is affected by that treatment. The medical model, however, addresses ethics from a more moral point of view.

## Preference

I do not prefer one model over the other. Both relate to distinct domains, which are connected due to the increasing automation in healthcare. If a system is developed that informs therapists of the best possible choices in healthcare, such a system needs to adhere to both ethical models. What I like is that the models, in my opinion, overlap in some aspects. Both models imply that patients or clients should have autonomy over their care or the data and information gathered about their bodies during treatment.

## Which model is most suitable for Data Ethics?

The PAPA model is the most suitable for data ethics in general, as it was specifically designed for information technology development. On the other hand, if data-driven models are being developed, then the healthcare model may be more applicable, as the model would directly affect the therapy a patient receives.