DARA RASOAL has experience working in a variety of settings in hospital and community healthcare in Sweden and Norway. He received his Bachelor and Master’s degree in healthcare science from the University of Borås. He obtained a specialist qualification in operating room nursing in 2006. He also studied philosophy at Gothenburg University. His specific interest in ethics originated in his clinical practice in hospital settings. Since 2011 he has worked as a lecturer at the School of Health Sciences at Örebro University. He joined the Nutrition and Physical Activity Research Centre (NUPARC) in January 2012 as a doctoral candidate.

Healthcare personnel frequently encounter ethically difficult situations in their everyday work, which can generate feelings of uncertainty about the best course of action to take and even moral distress. Provision of clinical ethics support is an important approach to supporting healthcare personnel in dealing with such situations. The present thesis contains four studies which together describe perspectives on clinical ethics support, experiences of being in ethically difficult situations and experiences of facilitating ethical reflections among healthcare personnel. A range of qualitative methods were used including interviews and ethnographic research, and hospital, municipal and community home health care settings were included.

Healthcare personnel face complex demands and expectations from the healthcare organization regarding the provision of care as well as having to meet the needs of patients and their next-of-kin. Healthcare personnel need to find a balance among competing demands and expectations in order to satisfy the stakeholders involved and have to seek compromise. There is a need for clinical ethics support that helps healthcare personnel reflect individually and collectively on ethically difficult situations they encounter in their everyday clinical practice. Two perspectives emerged on clinical ethics support: a “Top-down” perspective, where an individual or a group of “experts” in ethics recommend the best course of action and a “Bottom-up” perspective that allows healthcare personnel to manage ethically difficult situations through ethical reflections led by a facilitator. “Bottom-up” approaches, such as moral case deliberation, which involve an external facilitator who creates a space for self-reflection among healthcare personnel, may reduce the risk of moral distress among healthcare personnel and promote care based on person-centred values.