How stillness and solidarity can quash injustice in health care

DEC 15, 2022

Timothy M. Smith
Senior News Writer

Physicians and other health professionals may frequently find themselves in morally distressing situations brought on by the fast pace of care delivery, the demands of technology in clinical spaces or even administrative burdens. And while they are presumably encouraged to call out systemic inequities and injustices when they see them, they may often feel powerless to change them, have too much on their plates to take on an added challenge, or be discouraged to act.

The December issue of *AMA Journal of Ethics*® (@JournalofEthics) explores how the actions and virtues of stillness and solidarity can transform health professionals from bystanders to upstanders at all stages of their careers.

“Stillness” is the intentional discipline applied to creating deliberate, restorative spatial and temporal interruption from day-to-day demands in order to nourish the moral, motivational generosity needed to care well for patients and to be good colleagues. “Solidarity” requires deliberate nourishing in health professions education and work environments, such that slowing down, a necessary precedent set of actions to becoming still, can be robustly achieved and engaged.

The issue investigates the ethical questions surrounding stillness and the responsibilities of various stakeholders to challenge the status quo in health care and stand in solidarity to address social needs and injustices.

The December issue of *AMA Journal of Ethics* includes the following articles.

How should clinicians in the emergency department (ED) cultivate relationships with technology so it functions in solidarity with patients?

2 “For Clinicians to Do Less, Organizations Must Do More.”
Medicine has been defined by doing, but bias, error and burnout are potential consequences of speed and constant activity.

3 “Mindfulness Reminds Us What Health Care Is For.”
What is health care for? Recovery strategies, techniques for becoming calm and reminders about why stillness matters can help us find a few answers.

4 “How Should Clinicians Ally With Patients Whose Health Is Unlikely to Be Improved by Even Numerous Clinical Encounters?”
Patients experiencing homelessness and mental illness face conditions and circumstances that deserve focused ethical and clinical attention.

Listen and learn

The journal’s December “Ethics Talk” podcast features a discussion with health care design consultant John Meyer about how human-centered design can help remove barriers to care. Another guest, multidisciplinary artist Eve Payor, discusses effective sound design in health care settings.

The December issue also features six author-interview podcasts. Listen to previous episodes of the “Ethics Talk” podcast or subscribe in Apple Podcasts or other services.

Also, CME modules drawn from this month’s issue are collected at the AMA Ed Hub™ AMA Journal of Ethics webpage.
A look ahead

Upcoming issues of the journal will focus on segregation in academic health centers, child abuse and neglect, and clinicians in government. Sign up to receive email alerts when new issues are published.