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*VIII Annual Symposium on Biomedicine, Ethics and Society: "Rethinking Informed Consent: The limits of autonomy"*

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## **Relational autonomy in palliative care**

In the hospital, respect for patient autonomy refers to 'the right to self-determination' and prerequisites non-interference. This negative right is to be secured by the legal principle of informed consent and is operationalised by allowing patients to exercise their capacities for self-governance by making informed, rational and free decisions. Physicians have a duty to inform their patients about their health status, proposed treatments, consequences and alternatives. Patients receive treatments only after they have given their consent. Informed consent presupposes that patients are competent and that they are capable of making rational choices and individual decisions: 'good' decisions are free of external influences or pressures.

In the last four years I conducted an empirical ethical study in the context of palliative care for women with breastcancer. I found that capacities for autonomous decision-making in patients are influenced (and sometimes even diminished) by patient- and hospital related factors. Patients do not always have the feeling that there is something to choose really. They often feel frightened and they sometimes let the doctors decide for them.

Respect for autonomy is not sufficiently secured by the requirements of informed consent. As a negative right, informed consent unrightfully presupposes that patients are autonomous and ignores the fact that autonomy is a 'situated phenomenon' influenced by several factors. Due to its prerequisite of non-interference, informed consent does not guarantee that patients are actually capable of being autonomous. As an alternative I therefore introduce the notion of 'relational autonomy'. Relational autonomy refers to the idea that people are embodied and socially situated persons who develop their capacities for autonomy in a social or relational context. The ethical principle of respect for autonomy as a means to protect the patients' interests, should focus on situations of care in which impediments to autonomy are brought to the fore and patients are supported in developing their autonomy skills.