ABSTRACT

Medical tourism is rapidly growing. There are various reasons for this form of travel; from having life-saving surgery, receiving organ transplants and other vital operations, to therapeutic massage, using hot spas, and cosmetic surgery, and from receiving assistance with infertility to assisted suicide services at particular destinations. Some forms of medical tourism have strong ethical issues attached to them, but there are also ethical issues that may apply to almost all cases, and these can be discussed in a general way. This chapter discusses fundamental definitions of the concepts and general ethical issues in medical tourism, and then explains in more detail some of the moral issues in medical tourism that need to be examined from an ethical standpoint. The chapter establishes common ground for discussion based on broadly accepted principles that can be used almost universally as general guidelines for ethical decision-making in medical tourism activities.

INTRODUCTION

Tourism for the purpose of receiving medical or health care is becoming increasingly more popular, however many associated ethical questions remain unanswered or have not been debated thoroughly. If the ethical aspects of medical tourism are left unsettled, problems may ensue that could undermine the ‘benefits’ of medical tourism, and affect its proper development. Therefore, the proponents of the development of medical tourism programs in any market should always recognize that there may be a need to resolve potential ethical issues. The first step in any such development process should be to identify and discuss ethical issues in medical/health care with people who have had the experience of working as an ethics/bioethics consultant.

At the outset, it is important to note that laws and regulations are not a substitute for ethics, though there are interrelations between the two. For example, ethical considerations may be the background to enacting new laws to help reduce the likelihood of a problematic issue to arise, but other problems may already exist that were not foreseen in existing laws or policies. In such instances, following a pre-defined ethical course of action may help prevent problems from arising, or mitigate existing ones that could
damage the stance of medical tourism, or could lead to the setting of broad restrictions on its operation by law (Scheper-Hughes, 2000). On the other hand, there may be instances where loopholes in the law are abused when ethical considerations have been disregarded or deemed unnecessary.

Therefore, ethical consideration is needed at all times disregarding the coverage level of existing laws and/or the level of obedience relating to existing law and regulations. This requirement becomes very important in the case of health/medical tourism because the relevant laws and regulations on behavior in the country of origin and destination can be very different. In such instances, an ethical understanding may bring people, and their attitudes and behaviors, closer together. It is necessary also to understand that the ethical values that one person or culture holds may be unavoidably different to those of others living in a different culture in another part of the world. It is true that when a tourist travels to a particular destination, certain activities need to be undertaken in different ways, or there may be differences in priorities, and these can lead to clashes over cultural values. However, there are certain other values, more basic, which are more or less universal and can be used as a guide in ethical debates. This chapter thus recommends a ‘universal principles’ approach in resolving the ethical aspects of current and emerging issues and problems in the area of health/medical tourism.

In this chapter, a set of basic ethical principles that are more or less universal is outlined, so that these can be used to deal with the most common issues arising in medical tourism. The Universal Declaration on Bioethics and Human Rights adopted in 2005 by the 33rd session of the General Conference of the United Nations Educational, Scientific and Cultural Organization (UNESCO, 2005) provides 15 universal principles as a foundation for response to ethical dilemmas and controversies. Seven principles from among these are especially relevant to common issues in medical tourism. They include the principles of “autonomy and individual responsibility”, “benefit and harm”, “consent”, “respect for human vulnerability and personal integrity”, “equality, justice and equity”, “social responsibility and health”, and the “sharing of benefits”. Although in medical ethics the four principles of respect for autonomy, non-maleficence, beneficence, and justice have primary significance (Beauchamp & Childress, 1976), the wider set of seven principles provide a richer context for a discussion of the increasingly complex issues of health/medical tourism.

In the following sections, the main ethical issues associated with medical tourism are referred to, but only after the chapter explains some of the basic concepts in ethics, as well as the seven principles mentioned above. These concepts need to be understood for the discussion to be meaningful.

**WHAT IS ETHICS?**

Ethics is an approach to human related interaction issues that stresses universal human values, especially a distinction between morally right and morally wrong choices (Beauchamp & Childress, 1976). Human beings are considered to be “ethical agents”; this implies that they have the responsibility (and the ability) to distinguish between right and wrong, just and unjust, fair and unfair, good and bad, and so on. These characteristics could be summed up in the concept of making better decisions or opting for choices that are more humane in a given situation. Ethical values can thus be looked upon as being the human rights of an individual, or crosswise as the duties or obligations of others towards an individual, and the individual’s responsibilities towards others and the wider society. These values can help regulate the relations between individuals in a society as well as the wider global community (Andorno, 2013).