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Method of presentation: oral presentation

Abstract title: Developing autonomy in pediatric healthcare: towards an ethical model

Background: The "four principles" approach (respect for autonomy, beneficence, non-maleficence and justice) is well established in medical ethics analysis. However, a series of problems arises when applying this approach in social pediatrics, since the classical dipole (physician - patient) is replaced by a triangle of actors (child - pediatrician - parents) and the child's autonomy is still developing.
Aim: To frame a model describing developing autonomy in child's healthcare while reflecting the "four principles" approach.

Method: Synthesis after literature study in a systematic fashion of four electronic databases (CINAHL, Pubmed, BELIT, WoS), focusing on i) the concept of autonomy referring to the absolute value of the autonomous individual, and ii) the age-driven process of reasoning and competent decision-making development.

Results: We summarized our findings developing a conceptual model that includes the child, the pediatrician and the parents. The pediatrician-child relationship is based on different forms of guidance and cooperation, resulting in varying levels of activity and passivity. Parental authority influences the extent of a child's autonomy, based on the level of respect of the child's moral equality. Finally, the child's decision-making competence may be related to the child's age. Driven by fiduciary interest or self-interest all actors aim at the maximization of the child's medical good.

Discussion: The model maps norms, values and morally relevant conditions that elucidate the situation of pediatric care. Relevant contextual, existential, conceptual, and social-ethical conditions shall be considered when applying the model, to facilitate dialogue in social pediatrics, including social pediatricians, children and their parents.

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