

LAUREN KATELYN O'DELL

1402 Patterson Office Tower | Lexington, KY 40506
lkodell.com | laurenkodell@gmail.com

EDUCATION

University of Kentucky, Philosophy Ph.D., Expected May 2023

Dissertation Title: *Redefining Paternalistic Practices in Women's Health: How Patriarchal Biases Affect Medical Autonomy of Female Patients in the Clinical Setting*

Committee: Julia Bursten (co-chair), Lindsey Chambers (co-chair), Clare Batty, Tim Sundell, and Carol Mason

University of Kentucky, M.A. Philosophy, 2018

Eckerd College, B.A. Philosophy, 2016

AREAS OF SPECIALIZATION Normative Ethics, Clinical Ethics, Feminism

AREAS OF COMPETENCE Philosophy of Language, Feminist Epistemology

PUBLICATIONS

Buchanan, C., Lincoln J., Chaudhary S., Graham, C., Van't Land, A., O'Dell, L., & Smith, C. (2021). Developing a Philosophy Summer Camp at the University of Kentucky. In Caire Katz (Ed.), *Philosophy Camps for Youth: Everything You Wanted to Know About Starting, Organizing, and Running a Philosophy Camp* (pp. 35-46). Rowman & Littlefield.

PRESENTATIONS

"Understanding Reproductive Coercion in the Clinical Setting," University of Louisville Healthcare Ethics Speaker Series, 2022

"Barriers to Voluntary Sterilization: Careful Practice or Reproductive Paternalism?" American Society for Bioethics and Humanities Annual Conference, 2020

"Beyond the Lie: How Patients Might Be Trying to Convey Truth Through A Lie," American Society for Bioethics and Humanities Annual Conference, 2020

"Lying to Convey Truth: How Power Dynamics Can Push Patients to Lie to Their Providers," The Carol Carfang Nursing and Healthcare Ethics Conference, 2020

“Choice Preservation or Reproductive Paternalism?: Analyzing Refusals to Provide Voluntary Sterilizations on the Basis of Non-Medical Factors,” Albany Medical College Reproductive Ethics Conference, 2019

“The Opioid Crisis: Breakout Session Introduction,” Mid/South Philosophy of Science Conference, 2019

“Beyond Intimate Abuse: Recognizing Reproductive Coercion in the Clinical Setting,” American Society for Bioethics and Humanities Annual Conference, 2018

With Rebecca Yarrison, “Managing Selective Adherence to Treatment Plans,” The Carol Carfang Nursing and Healthcare Ethics Conference, 2018

“Effects of Secularism on the Modern Student,” SOPHIA Conference, 2015

“A Philosophical Inquiry: What Does Our Liberal Arts Education Mean to Us?” Eckerd College Annual Humanities Symposium, 2015

TEACHING EXPERIENCE

Primary Instructor, University of Kentucky

100-*Introduction to Philosophy: Knowledge and Reality*, Spring 2018

120-*Introduction to Logic*, Fall 2018; Fall 2022 (online)

130-*Introduction to Philosophy: Morality and Society*, Fall 2017; Spring 2020

305-*Healthcare Ethics*, Fall 2017; Spring 2019; Summer 2019, 2020 (online); Spring 2021; 2023 (online); Fall 2022 (online)

310-*Philosophy of Human Nature*, Spring 2021

315-*Philosophy and Science Fiction*, Spring 2020; Fall 2021 (online)

340-*Introduction to Feminism and Philosophy*, Fall 2018

380-*Death, Dying, and Quality of Life*, Fall 2020

334-*Business Ethics*, Spring 2018; Fall 2020, 2021 (online); Spring 2022; 2023 (online)

340-*Introduction to Feminism and Philosophy*, Fall 2018

380-*Death, Dying, and Quality of Life*, Fall 2020

Lecturer, University of Louisville

222-*Contemporary Moral Problems*, Fall 2022 (online)

225-*Business Ethics*, Spring 2023 (online)

Online Course Designer, University of Kentucky

305-*Healthcare Ethics*, Summer 2018

Microteach Instructor, University of Kentucky

*University Teaching Assistant Orientation, Summer 2017; January 2018; Summer 2018;
Summer 2019*

Philosophy Camp Lecturer, University of Kentucky
*University of Kentucky High School Philosophy Summer Camp, Summer 2018, Summer
2019*

Recitation Leader, University of Kentucky
100-Introduction to Logic, Spring 2017

Teaching Assistant for Robert Sandmeyer, Ph.D., University of Kentucky
205-Food Ethics, Spring 2022

Teaching Assistant for Anita Superson, Ph.D., University of Kentucky
340-Introduction to Feminism and Philosophy, Fall 2021

Teaching Assistant for Megan Wallace, Ph.D., University of Kentucky
100-Introduction to Logic, Spring 2017

Teaching Assistant for Rebecca Yarrison, Ph.D., University of Kentucky
305-Healthcare Ethics, Fall 2016

AWARDS AND FELLOWSHIPS

College of Arts and Sciences Dean's Competitive Fellowship, University of Kentucky, 2019

CONSULTING EXPERIENCE

Ethics Consultant, GLO House South Africa
Executive Board Member, Vice Chair, Policy Writer, 2019-present

Voluntary Ethics Consultant, Baptist Health Richmond
Ethics Committee Member, Policy Writer, 2016-2020

Community Standards Board Clerk of Notice, Eckerd College
Acted as judiciary board member for conduct and ethical issues, 2013-2016

RESEARCH EXPERIENCE AND INTERNSHIPS

Research Assistant for Rebecca Yarrison, Ph.D., University of Kentucky, 2017-2019

Peer Mentoring Internship, Eckerd College, 2013-2014

GRADUATE COURSEWORK

2020

Seminar in Value Theory: The Problem of Procreation (audit)
Lindsey Chambers

2018-2019

Seminar in Metaphysics and Epistemology: Philosophy of Science
Julia Bursten

Topics in Philosophy: Medical Ethics
Rebecca Yarrison

Topics in History: Apologies for Historical Misdeeds
Phil Harmon

Seminar in Metaphysics and Epistemology: Language and Power
Tim Sundell

Seminar in Recent Philosophy: History of the Frankfurt School
Arnold Farr

2017-2018

Seminar in Metaphysics and Epistemology: Philosophy of Mind
Clare Batty

Advanced Topics in Ethics: Evil and Immorality
Anita Superson

French for Reading
Jeorg Sauer

Seminar in Ancient Philosophy
David Bradshaw

Feminist Philosophy
Anita Superson

Contemporary Philosophy: Analytic Turn
Julia Bursten

2016-2017

Proseminar on Teaching Methods
Eric Sanday

Seminar in Modern Philosophy: Self-Consciousness
Stefan Bird-Pollan

Proseminar in Metaphysics and Epistemology
David Bradshaw, Brandon Look, Clare Batty

Seminar in Value Theory: Moral Psychology
Anita Superson

Symbolic Logic II

Meg Wallace
Ethical Theory
Anita Superson
Proseminar in Value Theory
Eric Sanday, Stefan Bird-Pollan, Arnold Farr

ADDITIONAL EDUCATION

Grad Degree+ Professional Development Certificate in Diversity, University of Kentucky
Year-long professional development workshop and lecture series on diversity training that included topics such as unconscious bias, managing generational differences in the workplace, and personality differences, Spring 2022

Grad Degree+ Professional Development Certificate in Leadership, University of Kentucky
Year-long professional development workshop and lecture series on leadership training that included topics such as conflict management, organizational ethics, and team building strategies, Spring 2022

Grad Degree+ Professional Development Certificate in Creative Problem-Solving, University of Kentucky
Year-long professional development workshop and lecture series on problem-solving solutions that included topics such as time management, adapting to change, and innovative decision-making models, Spring 2022

Grad Degree+ Professional Development Certificate in Communication, University of Kentucky
Year-long professional development workshop and lecture series on communication that included topics such as communicating across cultures, presentation principles, and collaborative communication strategies, Spring 2022

Grad Degree+ Pedagogy Track Certificate in Instructor-Student Rapport, University of Kentucky
Year-long Graduate School workshop and lecture series in teaching and professional development with an emphasis on pedagogical strategies for fostering instructor-student communication, Spring 2022

Visiting Observation Experience, University Hospitals Cleveland Medical Center
In person, clinical ethics experience and observation with the Clinical Ethics team. Involved patient consults, family meetings, and ICU rounding with interdisciplinary teams, December 2019

Visiting Observation Experience, Cedars-Sinai Medical Center
In person, clinical ethics experience and observation with the Clinical Ethics team. Involved physician-centered ethics education sessions, committee meetings, and ICU rounding with interdisciplinary teams, November 2019

Learning and Observation Experience, University of Kentucky Healthcare
*In person, clinical experience and observation with the Director of Palliative Care.
Involved palliative care patient rounding, stroke patient rounding, family meetings, and
patient consults, October 2019*

UK Healthcare Schwartz Rounds, University of Kentucky
*Provider-centered discussion of challenging or distressing clinical cases and dilemmas
with a focus on interdisciplinary dialogue, Fall 2017*

Kentucky Healthcare Ethics Consortium Workshop, Richmond, KY
*Workshop presented by Courtenay R. Bruce, J.D., M.A., on ways to improve ethics
consultation services in hospitals, Spring 2017*

SERVICE

Kentucky Healthcare Ethics Consortium Annual Conference, *local organizer*, 2019

Philosophy Graduate Student Association, *president*, 2018-2019

University of Kentucky Graduate Student Congress, *representative*, 2019

University of Kentucky High School Philosophy Camp, *director, counselor, and lecturer*, 2018;
2019

Mid/South Philosophy of Science Conference, *local organizer*, 2019

ECOS Committee on Campus Change, *member*, 2014-2015

REFERENCES

Julia Bursten- *Associate Professor*
Department of Philosophy, University of Kentucky
jrbursten@uky.edu

Lindsey Chambers- *Assistant Professor*
Department of Philosophy, University of Kentucky
klchambers@uky.edu

David Bradshaw- *Professor and Acting Chair (2022-2023)*
Department of Philosophy, University of Kentucky
david.bradshaw@uky.edu

Avery Kolers- *Professor and Department Chair*
Department of Philosophy, University of Louisville
avery.kolers@louisville.edu

DISSERTATION ABSTRACT

REDEFINING PATERNALISTIC PRACTICES IN WOMEN'S HEALTH: HOW PATRIARCHAL BIASES AFFECT MEDICAL AUTONOMY OF FEMALE PATIENTS IN THE CONTEMPORARY CLINICAL SETTING

There are countless stories about missed diagnoses resulting from doctors dismissing a patient's testimony about symptoms and pain, articles about dwindling access to basic health services across the U.S., and cases where patients feel pressured into making decisions that they may not understand or may not even want. These narratives are common across healthcare, but what is particularly concerning is the fact that in most of these situations, the patient is a woman. Factor in rising maternal mortality rates and contentious political attitudes about women's health and healthcare in general, and it is easy to see how female patients are losing trust in their doctors and medicine. This lack of trust is a typical result of paternalism, an unethical practice that is largely considered a non-issue in 21st century medicine. However, there is evidence that women are systematically not taken seriously as testifiers and decisionmakers about their health, suggesting that paternalistic practices are still in play, further perpetuating violations of autonomy. In order to understand why this issue is so prevalent and problematic, we need to evaluate the concept of trust from an ethical position, and what role it plays in the patient-provider relationship.

In 2014, journalist Rachel Burge wrote an article for MSN news in which she recounted the stories of three women whose ovarian cancer had been misdiagnosed for months. The statistics Burge used at the time suggested that 7,000 women are diagnosed with ovarian cancer every year and that 4,300 of these women die, giving it the lowest survival rate for all cancers, even though if diagnosed early, 92% of patients will survive (Burge, 2014). Stories like the ones Burge tells are not unique to ovarian cancer and are particularly common in discussions about women's health (consider rising maternal mortality rates in the U.S). These bad outcomes are serious and ought to be a major concern for healthcare providers and ethicists. Solving the problem requires looking at the underlying causes of these outcomes, which seem to stem from misdiagnoses or late diagnoses and dismissal of expressed goals, values, or beliefs by the patient. A crucial step in obtaining a diagnosis, especially for things like ovarian cancer, requires proper analysis of the patient's self-reported symptoms. Based on stories by women about their healthcare experiences, this step is where providers seem to go wrong. Women often report feeling ignored, misinterpreted, or dismissed when they give accounts of pain and other concerning symptoms, as well as when expressing preference, values, or beliefs, suggesting that healthcare providers do not trust the testimony of their patients.

This dismissal of female patient testimony is not new. Prior to the end of the 20th century, paternalism was a standard practice in healthcare, allowing doctors to unilaterally make decisions about a patient's health on the basis that "doctor knows best." With the implementation of Beauchamp and Childress's Principles of Biomedical Ethics as the standard mode of care in clinical ethics, preserving patient autonomy became a top priority for providers, making paternalism incompatible with the contemporary practice of medicine. However, the issue of ignoring female patient testimony suggests that paternalistic ideologies have not been done away with completely, at least not in the cases of women. Because paternalism leads to non-autonomous decision-making, it is clearly a violation of autonomy. Since these non-autonomous decisions about healthcare lead to bad outcomes, it can also be said that violations of autonomy are directly correlated with bad outcomes. This means that autonomy should be protected and enhanced by providers. While the principlism method of healthcare is largely effective, these cases of testimonial injustice suggest that there is a problem with the principle of autonomy that needs to be addressed.

This problem can either reside within the conception of autonomy itself or it can mean that it is not being executed properly in the clinical setting. As it stands, the principle of autonomy seems sufficient. In fact, any more freedom in the definition could lead to a radical form of autonomy that could be dangerously at odds with the principle of beneficence, which is also integral to the role of healthcare. This suggests that the issue is with its execution, which makes sense given that providers seem to be overriding or repressing autonomy in these cases. The question then becomes why. I propose that the problem is a problem of trust, both for the provider and the patient. When doctors refuse to trust their patients and their reports of symptoms, values, and desires, they violate the patient's autonomy. These violations lead to bad outcomes, as shown above, and the patient then loses faith in the healthcare system. More than that, when the provider dismisses the patient or misdiagnoses the patient, trust in the patient-provider relationship erodes and could lead to refusals of follow-up care, which is also shown to lead to bad outcomes.

While trust in the patient-provider relationship is a two-way street, violations of trust seem to only negatively impact the patient. Because the trust relationship between female patients and healthcare providers is often tenuous, violations of trust are more common and often have far reaching consequences for women including but not limited to, misdiagnoses, limited autonomy and control over health plans, coerced decisions, and possibly even death. Understanding the nature of trust in the patient-provider relationship is necessary for solving this issue. Teaching doctors to trust their patients will ensure that we are able to enact autonomy and by extension, to improve outcomes for women. Trust, however, is a concept that requires philosophical evaluation, as well as clinical observation. Case studies can reveal failures of trust in the clinical setting and instances of broken patient-provider dynamics, giving insight as to how they lead to bad outcomes, but the concept of trust must also be addressed at theoretical level in order to see the role that trust plays in the actualization of autonomy. By combining both theoretical evaluations of trust and power dynamics with case studies in the clinical setting, models of

trusting patient-provider relationships can be developed. This topic will be applied to the three papers that comprise my dissertation as a common theme underpinning the various ethical issues that arise in the clinical setting.
