ON WISDOM: WHY “WAYS OF SEEING, KNOWING AND BEING”?

This chapter considers how different ways of seeing, knowing and being might inform how clinicians and practitioners make judgements, particularly in relation to the ethico-legal questions and considerations that arise in their work. What is meant by “ways of seeing, knowing and being” and why are these useful when thinking about the nature of wisdom? Since Foucault (1976) conceptualised the medical “gaze” that characterised work in the clinic, the lens of healthcare work has been a preoccupation of philosophers, anthropologists and sociologists. The way in which a healthcare professional is trained to see is detached, expert and powerful, yet there are other ways of seeing that, it is argued, inform wise practice. Ways of knowing describes the different types of knowledge and discernment that are required when practising medicine and engaging with its ethico-legal dimensions. Ways of being refers to the characteristics, behaviours and qualities that inform how someone responds when managing different types of knowledge in a context where uncertainty, emotion, complexity and pressure are common. Both ways of knowing and ways of being in practice are often implicit and under-considered yet are fundamental to practice, choice and, specifically, the nature of wisdom.

This chapter discusses that relationship between wisdom, ways of seeing, knowing and being, and the ethico-legal questions, considerations and challenges of medical practice. I argue, drawing on Havi Carel’s (Carel, 2013, 2016; Carel & Kidd, 2014, 2016) work on epistemic justice in healthcare, that wisdom, when understood as shaped by ways of seeing, knowing and being, serves as a valuable force in healthcare: as a counter to inherent imbalances of power, as a guide for education and development, as protection against burnout and compassion fatigue and as a reminder of the essence of what it is to be an individual clinician and an individual patient in a demanding, resource-constrained system.

WHAT IS WISDOM?

Wisdom has been a feature of virtue ethics since Ancient times; from the scepticism of Socrates about the possibility and limits of knowledge (Miller & Platter, 2010; Plato, c. 400 BC/2010) to Aristotle’s distinction between theoretical and practical wisdom (Aristotle, 349 BC/2004; Dowie, 2000). The nature of wisdom has preoccupied philosophers for centuries with the focus being predominantly, although not exclusively, on the personal rather than the systemic.
It speaks to how an individual perceives and responds to that which he or she encounters. For the purposes of this chapter, wisdom intersects with other character traits and depends on an integration of character, mind and virtue. Ethics and ethical practice are informed by wisdom in different ways, for instance, it may be a normative ideal or virtue but it also reflects a way, even a method, of responding to moral questions and conflict.

Contemporary ethicists too have prioritised wisdom, often conceptualised as *phrónēsis* in recognition of the practical and applied expression of wisdom in clinical practice (Chiavaroli & Trumble, 2018; Dowie, 2000; Kaldjian 2010). For the purposes of this chapter, wisdom is considered to be a constellation of traits, dispositions and behaviours that commonly encompass the features shown in Figure 22.1. These features, it is argued, are essential to the recognition of, and response to, the ethico-legal aspects of clinical practice which are often experienced as discomforting.

**Figure 22.1. Features of wisdom.**

- Awareness of personal values and capacity to act, for the most part, in accordance with those values
- Openness to experience and to others
- Capacity for forgiveness (of others and self)
- Reflectiveness about experiences and willingness to continue learning
- Interest in, and not being threatened by, diverse perspectives
- Empathy and kindness
- Curiosity and inquiry
- Flexibility and openness
- Humility and reflexivity
- Sensitivity to context, time and circumstance when considering response
- Capacity for recognising and addressing conflict
- Acceptance and management of uncertainty
- Awareness of personal strengths and limitations
- Commitment to the wellbeing of others, whilst taking care of self (with ego in check)
- Tendency to seek a balanced life

The relationship between clinical practice, ethics and law

Clinical practice prompts a myriad of moral questions and takes place within a legal framework. It is impossible for any healthcare professional to avoid the ethico-legal dimensions of their work. Yet, ethics and law as subjects are often misunderstood. Law may be seen as the “trump” card: ethics being “nice to have”