**How do we choose between two people in need?**

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**Introduction**

It's the year 2020, the middle of the covid pandemic. People are locked inside; a new virus is spreading like wildfire and hospitals are overly crowded. In fact, the hospitals really were not prepared for this many people in need of medical attention as a result of covid. Now imagine the following scenario: You are a doctor in control of Intensive Care. You have only one hospital bed available, this is where the dilemma starts. Two people enter the room on a rolling bed, an elderly woman, and a young pregnant adult. Both are in need of intensive care right this minute, but remember, you only have a single bed available. Who do you give medical aid to? Is it moral to choose one over the other using reasoning? Or is it moral at all?

**Ethical Dilemma**

As you have just read in the introduction, this essay is researching whether it's moral to choose one person over the other, in the scope of medical care. I will be researching this using different ethical schools and from my own perspective. Note that I will be using the dilemma from the introduction to come to conclusions using ethical schools. Later in the essay I will look into the bigger picture a bit.

The ethical schools I will be using for my approach on the topic are the following:

* Virtue Ethics
* Deontology
* Utilitarianism

**Virtue Ethics**

Virtue ethics is the ethical school developed by Aristotle in Greek times. This ethical school paints the picture of three boxes: a vice, a virtue, and another vice. Aristotle states that you can have too much or too little of a character virtue, an abundance or a deficiency (*Virtue Ethics (Stanford Encyclopedia Of Philosophy)*, 2022). The goal is to live life in the ‘Golden Mean.’ This means that your character is in the middle of two extremes, not too much but also not too little of a property (Eldridge, 2023). That said, how do we use this ethical school to answer our dilemma?

According to Aristotle, virtues are created habits that give humans the chance to achieve ‘eudaimonia,’ which translates to ‘human flourishing’ (Mba, 2024). In this context, the doctor has to get his virtue to align with the Golden Mean.

I think that the outcome can be based on one of the following ‘property paths,’ as I like to call it.

Firstly, the virtue of compassion is very important in this dilemma (Peterson, 2016). Compassion involves awareness of the suffering (of the patients) coupled with the desire to help them using medical care. The doctor has to be aware of the immediate and serious medical attention that these people need. However, compassion alone is not enough, you also need the property of practical wisdom (*What Is Practical Wisdom?*, 2017). Practical wisdom enables the doctor to make a logical and well-reasoned decision.

Secondly, the virtue of justice would lead to dividing the medical aid equally, right? Well, that is sadly not possible in this dilemma. Justice instead requires the doctor to consider who will benefit most from the available care. This involves not only the immediate chances of survival but also the potential long-term impact on the lives of the patients and their families.

Applying these virtues to the dilemma, the doctor might act as follows:

1. Compassion and Practical Wisdom: The young pregnant adult represents two lives: her own and that of her unborn child. Practical wisdom would point to the potential for both lives. Additionally, the young adult may have a better chance of recovery and a longer future ahead, which could weigh in her favor when considering.
2. Justice: In terms of fairness, the doctor must look at the effects of saving each patient. Saving the pregnant woman may lead to them experiencing a lot in the two lives, whereas the elderly woman, equally deserving of care, might have already lived through a lot.

Therefore, from a virtue ethics perspective, prioritizing the young pregnant adult can be seen as aligning with the virtues of compassion, practical wisdom, and justice.

**Deontology**

Deontology is the ethical school mainly associated with philosopher Immanuel Kant (Kranak, 2019). It focuses on sticking to moral rules (Kranak, 2019). In the context of our dilemma, where a doctor must choose between treating an elderly woman and a young pregnant adult, a deontological view would really show the value of each individual and the value of ‘moral rules.’

From a deontological perspective, the doctor must first recognize the ‘worth’ of both patients. The ethics like Kant would do, says each person should be treated as an end in themselves, never merely as a means to an end (*Treating Persons As Means (Stanford Encyclopedia Of Philosophy)*, 2023). This principle, known as the Humanity Principle, makes so you have to assess the value of both the elderly woman and the young pregnant adult equally.

Additionally, the Categorical Imperative, states that you ‘must act according to maxims that can be universally applied.’ This means that if I should be able to do something, so should others (The Editors of Encyclopaedia Britannica, 2024). This exact principle is called the Universalizability Principle (Muscente, 2020). In this situation, the doctor should consider what rule or principle they would be willing to apply universally in similar scenarios. A potential maxim might be: "When only one hospital bed is available, priority should be given to the patient with the greatest chance of survival and the potential for the longest life." This rule aligns with the duty to save lives and can be consistently applied.

If we also include the Divine Command Theory, which states that moral rules are determined by God's commands, the doctor might consider principles such as the sanctity of life and the duty to protect the most vulnerable (*Divine Command Theory | Internet Encyclopedia Of Philosophy*, z.d.). Many religious traditions emphasize caring for the young and the vulnerable, which could support prioritizing the young pregnant adult due to the additional life at stake, the unborn child.

To combine all the above, the doctor would prioritize saving the young pregnant adult. This is mainly based on the Humanity Principle and the Divine Command Theory, since the conclusion is mostly based on the example principles in the Divine Command theory and we *saw* both people not as means, but as ends.

**Utilitarianism**

Utilitarianism, a branch of consequentialism, looks at the morality of an action based on the outcome, aiming to maximize overall happiness or ‘utility’ (West & Duignan, 1999).

Jeremy Bentham and John Stuart Mill, key figures in utilitarianism, both state that the best action is the one that maximizes overall happiness and minimizes suffering (West & Duignan, 1999). Bentham introduced the Hedonistic Calculus (sometimes known as Felicific Calculus), a method measuring the pleasure and pain resulting from an action (Cartwright & Art, 2024). Mill, on the other hand, emphasized the quality of pleasures, arguing that intellectual pleasures are superior to physical pleasures (Davies & Davies, 2022).

Peter Singer, a later utilitarian philosopher, extends these ideas by arguing that we should try to reduce suffering and promote well-being as much as possible, considering everyone involved (Admin, 2019).

Applying these principles to our dilemma, the doctor must consider several factors:

1. Quantity of Pleasure and Pain (Bentham’s Hedonistic Calculus):
   * Intensity and Duration: The young pregnant adult represents two potential lives: hers and her unborn child’s. Saving her could result in more extended and intense future happiness for both her and her child.
   * Extent: The young pregnant adult might have dependents and a family who would benefit significantly from her survival, thus maximizing the overall utility and happiness.
2. Quality of Pleasures (Mill’s Utilitarianism):
   * The young pregnant adult can experience a wider range of pleasures, both intellectual and emotional, throughout a longer future. This aligns with Mill’s emphasis on higher-quality pleasures.
3. Reducing Suffering and Promoting Well-being (Singer’s Utilitarianism):
   * By saving the young pregnant adult, the doctor is also protecting the well-being of her unborn child, thus reducing suffering and increasing well-being for two individuals.

From a utilitarian perspective, the doctor should prioritize saving the young pregnant adult. This decision maximizes the overall benefit by considering both the quantity and quality of future pleasures and the reduction of overall suffering.

**My own interpretation**

And as a last consideration before the conclusion, we have my opinion. I found this a hard dilemma to give a solution to, mainly because I don't view one person as more valuable than another. Still, I would look at this dilemma in terms of years as a system of measurement. The person with the greatest number of years left, and the biggest chance of survival would be the one I would choose to give medical aid to. Purely because they have more left to experience that the other person may already have experienced. This can be seen as a form of justice and fairness, although it would never be a fair choice for the other person. That said, everything depends on the situation's context and resources, since this is an abstract and dystopian scenario. I also don't have any experience in this field which is why I'm going with what I think is reasonable. I don't think anyone would really like to make this choice in their life.

**Conclusion – The bigger picture**

The bigger picture we need to look at is when the circumstances are not *this*bad. Based on this ‘research,’ it would be acceptable to prioritize one patient over another if there really is no option left. This patient would be the one with the longest life expectancy, the one with the most left to experience, the one that would result in the most overall happiness, and so on. Of course, doctors will do everything in their power to save all of their patients, and hopefully, doctors will never have to make such a decision.

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