

MCDB 60 Notes

Lecture Notes

10/1 - Week 1

- Biomedical ethics refers to the study of ethical questions that arise during the practice of medicine and research in the biological and medical sciences.
 - It is a subfield of Ethics, which is the study of the principles that determine right or wrong conduct.
 - Basically the study of right and wrong with behavior and actions.
- New tech has given us opportunities to make certain actions, we have a capacity to do something that we're not sure that is morally correct.
- There is an assumption that our self interest should be constrained by the independent principles of right or wrong.
 - It shouldn't matter what our interest is, it should matter about what we believe is right and wrong.
 - Other constraints could be the interests of others, consideration of the consequences of our behavior, considerations of nature, animals. All of these things make us say "Maybe we shouldn't do this, even though it would be beneficial"
- We should care about this stuff because:
 - It's Personal: You'll know what you stand for, and why you stand for it
 - It's Political: You'll make some influence on the political situation based on what you believe in. We are citizens in a democracy and we have a stake in the decisions that are being made.
 - It's Interesting!
- Big picture questions
 - Is physician assisted suicide moral/ethical?
 - Should physician assisted suicide be legal?
- Physician assisted suicide is a little different than withdrawing treatment.
 - It's a bit more active from the physician's POV
 - The difference according to AMA is the act of prescribing a method that has death as a consequence rather than stopping the act(s) that is preserving life.
- Euthanasia is the administration of a lethal agent by another party for the purpose of relieving patient's pain.
 - This is more immediate than the physician assisted suicide
 - In physician assisted suicide, the patient themselves commits the act, but the doctor is the one that provides the material or the instruction.
- AMA says that there is no ethical difference between withholding and withdrawing medical treatment, even though there may be an emotional difference between the two acts.

- This is made okay by the reasoning that the patient is the one that has autonomy in this situation.
- AMA doesn't think that the physician assisted suicide or euthanasia is right b/c:
 - Cause more harm than good
 - Contradictory to role as a healer
 - Difficult to control
 - Societal risk
- All the above reasons focuses on the consequences of if physician assisted suicide or euthanasia is allowed.
- Maynard talks about the consequences of what will happen if physician assisted suicide or euthanasia is not allowed. She talks about the pain and suffering. This is a moral appeal since we can all agree that suffering is bad. She also says that she wants autonomy over her life.
 - We saw a moral argument, and an argument for patient autonomy.

10/3 - Week 1

Active and Passive Euthanasia (James Rachels)

- Central theme is that the other side thinks it is permissible to withhold treatment and allow patient to die rather than taking direct action to kill a patient.
 - Aka killing patients is worse than letting them die.
- Article wants to say that there isn't an ethical difference between the two actions (killing and letting die).
- One argument is that withholding treatment will sometimes cause more pain than taking direct action, and in both cases the end result is the same anyway. If you are in favor of passive euthanasia, you agree with the goal of less human suffering, and then there should be no reason you choose passive over active since both have the same end consequence but active will have less suffering.
 - Basically, once the decision is made to not prolong the pain, active euthanasia would be better in decreasing the amount of pain rather than withholding treatment.
 - If you say otherwise, then you're cool with letting the patient suffer more.
 - If the goal is to reduce the suffering, given that the patient has already made the conscious decision to "give up", then active euthanasia is cool.
- Other argument is that the decisions are made on irrelevant grounds.
 - I think it's saying that there are other factors that influence the decision of whether or not active euthanasia is okay and it complicates the situation.
- 3rd argument is that there really isn't a moral difference between killing someone and letting someone die.
 - Through a hypothetical example, author shows 2 situations and asks which person, if any, took better actions.
 - In these cases, if the decision is wrong (patient would have survived if you didn't withhold treatment or if you gave lethal injection), the end result will be the same.

- AMA claims that stopping treatment is not the intentional termination of life, while author says it is.
- Author says that because we don't really hear about the cases where people let others die, we don't put it on the same ethical level as the active act of killing.
- Author also addresses the counter argument that says that passive and active euthanasia are different because in passive, the cause of death is the original cancer/disease, while in active, the cause is the doctor.
 - The counter to this is that letting someone die is a conscious decision and is a type of action the doctor is making and so it's not just the cancer that is affecting the patient, but it is also the doctor's decision and action.

4 Myths About Doctor-Assisted Suicide

- People think that the reasons for patients wanting euthanasia are in physical pain, but rather they want it to escape the psychological distress. This makes euthanasia look a lot more like suicide.
- People also think assisted suicide is the result of advanced technology.
- People think that assisted suicide will improve the end of life for everyone, but author says that statistically, this isn't a very popular way of ending life. If it was, then we would see a large portion of the public asking for these choices.
- People think assisted suicide is a quick and painless way to die, but author says things can go wrong or can take a long time.

Lecture

- The two big questions are "Is Physician-Assisted Suicide Moral" and "Should Physician-Assisted Suicide be Legal". The same questions also for voluntary active euthanasia.
- Physician assisted suicide is just doctors giving medication and patient having option to consume and by extension commit suicide.
 - Patient makes request for assistance in dying.
- Voluntary active euthanasia is patient asking for this and the actual act of giving the medication is committed by the doctor.
 - The only difference between this and physician assisted suicide is that the patient isn't committing the death causing act, but rather it is a 3rd party.
 - Involuntary active euthanasia is where the patient doesn't make the decision because they are incapacitated and the decision is made by the doctor. Most people think of it as murder though.
- Voluntary passive euthanasia is doctor facilitating patient's death not by administering anything but by withdrawing treatment.
 - Big difference is withdrawing life-sustaining treatment versus the act of administering something to cause death.
 - Withholding is a bit different than withdrawing. Withdrawing is an act though.

- There are conditions that are normally associated with situations where physician assisted suicide or euthanasia is an option.
 - Terminal illness
 - Death expected within a certain period of time
 - Dying process will involve pain and suffering
 - Mental health is sound at the time of decision. No depression or mental illness.
 - We need to make sure of this in order to keep patient autonomy, that the patient has the ability to make rational decision. This is respect for individual choice.
- We put the above requirements because we want euthanasia or assisted suicide to be a last resort, and we don't want to have to use this frequently.
- Respecting patient autonomy involves respecting people's choices when certain background conditions are true. This is necessary because patients may not be making decisions that are true to them. The patient needs to be healthy in order to give that informed decision.
 - There are some mental conditions that impede on an individual's choice. However, there are lots of things that our affect our decision making, so why is having a mental condition different?
- If we take so much time to really look at individual choice and we care so much about autonomy, why don't people accept suicide or why is there a stigma around it?
 - The counters are that it usually isn't an autonomous choice (might be the result of mental illness or a circumstance of desperation) and the person isn't really in the right state of mind.
 - Another is that the act of this self destruction is an act that removes your free choice. Aka autonomy is not the same as erasing autonomy.
 - Another is the social consequences of the act of suicide. This reasoning looks at the effects on others rather than effects on self.
- Going back to the question of whether this stuff is moral, we need to figure out which moral principles are true.
 - Start with a proposed principle.
 - Test the principle against imagined or real cases.
 - Revise the principle according to info gathered from the application of it to test principles.
 - Repeat until you find an appropriate principle.
- Try with an example of the absolutist principle which says that all efforts must be made to sustain human life and that we should never allow a patient to die.
 - Counter is that in the process of death, patient could undergo extreme suffering.
 - If this broad principle is true, then that means that people cannot give Do Not Resuscitate legal documents since people will try to treat them. Cases of voluntary withholding treatment is why this doesn't work. There are cases where the patient does not want treatment and we should accept that choice in order to keep patient autonomy.

- Another principle is that it's okay to withhold treatment at the request of patient autonomy.
- Another principle is that it's okay to withhold or withdraw treatment at the request of patient autonomy.
- AMA says that these are the same. As long as you're onboard with withholding treatment, then you should be good with withdrawing because it's the same act, just at a different point in time.
 - One of the articles (James Rachels) uses this same format of proving moral equivalency in order to make the claim that passive and active euthanasia have no moral difference between each other.
- The way Rachels makes the arguments is that they say their thesis (no moral difference between passive and active euthanasia), and then state the best arguments from the other side, and then explain why they are wrong.
- The two opposing arguments that Rachels tries to fight against are:
 - Argument from pain and suffering
 - Argument that killing is worse than letting someone die
 - Appeals to the action being taken. People who follow this argument follow a deontological principle that there is never a case where you commit the act of killing someone.
- The 3 ethical theory types
 - Consequentialist
 - Deontological
 - Virtue Theory

10/5 - Week 1

- Philosophy is study of what is true about things that we cannot see/touch/feel.
- In philosophy, we test moral claims through argumentation. This is similar to how we test hypothesis in science through experiments.
- In an argument, you'll have premises and a conclusion. The conclusion is the thing you're trying to prove and the premises are the reasons.
 - In a good argument, the premises and conclusion are related and logically follow.
 - Also, the premises should be true.
- If I object (provide a counter examples) to one of the premises, then it doesn't necessarily mean that the conclusion is false.
 - Other people have different and better lines of reasoning.
 - We can agree on the same conclusion but not on the way that the conclusion is reached.
- Example
 - 1. Cars make travel convenient
 - 2. Convenience is good
 - Conclusion: Cars are good

- In the above example, people can attack the premise #2 that convenience is good, because with that blanket statement, people can give an counter example and that can dismantles your argument.
- People can have main arguments but can also make separate side arguments to respond to the possible counters.
 - Try to track them as you go along
- When the physician assisted suicide and euthanasia case, one of the central questions comes down to what you believe a doctor's role should be?
 - Prolong life?
 - Minimization of pain?
 - Consequentialist argument
 - Respecting patient's decision?
 - Deontological argument
- Which theories should take precedence over others?
- The two above questions require arguments to see what the answer is
- The Hippocratic Oath, "Do no harm", is tough to use because we really don't have a consensus on what harm is.
- In Rachel's argument, there are both consequentialist (more pain in passive than active) and deontological (the children story) reasons.

10/8 - Week 2

Consequentialism

- Moral theories are about what individuals should do. They have:
 - A view on what is good or valuable (Theory of the good)
 - A view about the properties we want realized in our actions (Theory of the right)
 - How we should behave wrt to that value
- Consequentialism says that whatever values an individual adopts, the proper response to those values is to promote them.
- An option is a possibility that can be realized, and a prognosis is the different ways in which the possibility can come to be realized.
- Every prognosis for an option has a value that is influenced by the properties that result from the new world.
- Every option has a value fixed by its prognoses. Basically it is a function of the values associated with the different ways it may lead the world to be.
- We know that an agent promotes certain values depending on the ranking of the prognoses of options.
- Non-consequentialists say that values should be honored and not promoted.
- Consequentialists don't really forbid anything but rather focus on what are the best consequences. Therefore, nothing is prohibited.
 - Counters to this view say that it creates the habit of thinking about this stuff.
 - They also say that with this view, you have to really deliberate over every decision because you have to look at all the options and all the prognosis,

because no act is really forbidden. They'll become like computers in that they won't recognize others, consider relationships, etc.

- One point about consequentialism is that the focus gets put on the justification of one option over another, rather than the account of how agents actually deliberate and make decisions.

Principles of Morals and Legislation

- Pain and pleasure are what point out what we should do and what we eventually do.
- The principle of utility approves or disapproves of every action according to the tendency it appears to increase or lessen the happiness of the person or group whose interest is in question.
- Utility refers to property of something that tends to produce benefit, advantage or pleasure.
- The interest of the community is the sum of the interests of the members who compose it.
- An individual has its interests promoted if something increases the sum of his total pleasures.

Lecture

- Main question of ethics is what is the right thing to do?
 - This assumes that we have an agent, situational context, and a choice over a number of actions.
 - We want a set of actions that are good and that are forbidden according to the ethical theory.
- Ethical theory attempts to give us an account of the right making features of an act.
 - They should be explanatory and prescriptive.
 - It's supposed to be testable
 - There are a set of propositions and principles associated with it.
- 3 Main types of ethical theory are consequentialist, deontological, and virtue theories.
 - Consequentialist: The rightness of an act is determined by the consideration of the consequences. The act that leads to the best set of consequences.
 - Deontological: Rightness of an act is determined by whether the act adheres to a set of moral rules.
 - We have to check a box on passing the relevant tests before making the actual decision.
 - Each deontological theory will prescribe different rules.
 - Virtue: The right act is one that the virtuous individual would make.
- Consequentialism would say to flip the switch in the trolley problem and save 4 lives.
- Deontological arguments would say don't flip it because you should never make an act to kill people.
- Whenever there is a rule that says you must not ... then you're likely looking at a moral rule for a deontological argument.

- For the bystander case, an objection would be that you should never use other people as a means to an end in which they can't share.
- Only one of these three types of ethical theories can be correct at a time.
- Consequentialists will argue that everyone, at a certain level (as shown in the nuclear vs trolley example), will resort to consequentialism over a set of moral rules to follow for deontological theories.
- Ethical theories have a theory of the good and the right.
 - Good is what we value.
 - Can include anything, and principles in particular.
 - Ex) Life, green signs, pain, etc
 - When comparing consequentialism and deontology, we have to remain neutral to these values.
 - Bentham says that the values are pleasure and the removal of pain.
 - Right tells us how to react to values.
 - This is the part that really differentiates between consequentialism and deontology.
 - Honor and instantiate values in your act (Deontology)
 - Promote value (Consequentialism). We want the most of what we can get. A form of maximization.
- In the trolley example, let's assume that both theories say that human life is valued.
 - The consequentialist will say that we're promoting human life by looking at the number of lives saved.
- Consequentialism says that the right act promotes or maximizes values, whatever those values are.
 - Often times, you'll make an action that doesn't promote it now, but rather maximizes in the long term. In order to promote it long term, there has to be some short term loss.
- Deontological theories say that the right act honors/instantiates values, whatever those values are.
- People from both sides can value the same things, but what really separates us is how we look and act on those values. (promoting vs honoring) Structure, not values, is what matters.
- You cannot honor and promote values at the same time in certain cases.
- Consequentialism is a theory of justification. We can look afterward and say that they made a good decision, but it's not necessarily a decision theory because in the moment you can't think through consequences of every single decision and choice.
- You can have a set of rules in consequentialism, but the rules aren't stringent. In these scenarios, the following of those rules must maximize the value of the consequences.

10/10 - Week 2

Lecture

- Consequentialists say that an act is good/bad based on consequences of the act. Deontological says that rightness is whether the act adheres to rules.
 - For a set of values, consequentialists say that you should do the act that promotes the value, but deontological folks say you should do the act that honors the value.
 - The set of values isn't really important here, the difference between the two theories is how you view those values and the actions you make based on that.
- Utilitarian theories are a subset of consequentialist theories. They also have the maximization of value requirement. Requires us to promote the value that we take on.
- What the difference is between all the types of consequentialist theories is what the set of good/values entail.
- So for utilitarianism in particular says that the right act is the act that maximizes happiness and the absence of pain.
- Theory of value + maximization requirement = utilitarianism
- Consequentialist Pros
 - Can always construct examples where absolute adherence to a moral rule seems implausible. Find cases to force people to break rules when the circumstances are dire enough
 - Killing 1 guy or he detonates a nuclear bomb
 - Argument from simplicity.
 - We, on this team, only has one method of value so it's simple.
 - Also, deontologists can't explain why certain values are honored/instantiated, but others are subject to promotion. Deontological counter would be that values are different, so you can promote some and honor others. Our counter would be that you still need to make some distinction between the two.
 - This theory follows that of human rationality.
- Consequentialist Cons
 - Consequentialism can recommend pretty bad things because the theory is ready to sacrifice the short term and the less number of people in favor of the masses and the long term.
 - Before I do something, I have to look at all the consequences and calculate whether that decision is right or not.
 - Publicity Objection?
 - We don't have to think of world consequences or society consequences when we are thinking of committing an act, but rather you yourself are just seeing the effects from that act.
 - Puts a lot of responsibility on each person to be the perfect agent who always makes acts that maximizes values. Sometimes those acts can be very tough (Have to shoot the 11th guy in order to save the 10 other people).
 - Also over demanding in terms of what it expects (you should never buy a \$3 latte because that's not the act that will maximize the world benefit).
 - Anything you buy can be better spent elsewhere to make the world better.

- All the above applies against utilitarianism as well.
- All the reasons below are in favor or not in favor of the value of happiness being at the core of the theory
- Utilitarian Pros
 - Reflects the nature of human rationality. It really just is about pleasure and pain and that's how the mind works.
 - Theory of equality. Everybody counts equally in this theory.
 - Simple and can be easily applied
- Utilitarian Cons
 - Experience machine. We care more about state of mind and happiness. We actually care about our actual acts, there is something about actually experiencing life, and this is independent of our feelings as a result of those actions.
 - Some people will have different affected levels of utility as a result of particular actions.
 - If one person experiences hella happiness for one unit of resource. Then, you technically should give all the resources to that person.
 - This creates a form of inequality because we process utility in different ways.
 - The "good and equal" recommendations of utilitarianism is contingent on these assumptions that people are equal in utility.
 - Sadist/Sexist Preferences: If some people gets satisfaction from being racist to others, that is still utility to that person, and thus it is something that will be maximized.
 - Diminishing marginal utility
 - Grow the population, but the individual happiness is low?
 - Do pain and pleasure of animals count in the calculations?
- Deontological is extremely rule based and that you should never ever break certain moral rules.
 - The creation of the rules could be created by a religion or a person.
- Kantianism is a form of deontology
 - Kant rejects utilitarianism because he does not think that happiness is the object of human life. He says that the fact that we reason creates situations where he don't immediately go for happiness. If you use reason over instinct, you're likely not going with the action that maximizes happiness.
 - Kantian autonomy said that because all humans are rational and thus we make our own decisions, we have to give ourselves a moral law and then we should live by it. Construct a law that we want to live under, and then abiding by it.
 - Kant Good Will is the disposition we have to act morally just for the sake of acting morally, as opposed to doing it for some external reason. Cannot have morality contingent on external influences and particulars of the world. The only good thing we have is our good will, or our desire to do the right thing because it is the right thing.

- Acting from duty kind of goes along with ^. Individuals have the idea of what are good acts and then you just follow your duty. The only good action is the motive from duty.
- The actions have to be universalizable.
- Categorical imperative is a command or recommendation of behaviour that applies to all humans regardless of circumstances and ends. We know for sure that the agent is acting out of a sense of duty and not as a result of anything else.
- When you say the above (morality is system of categorical imperatives), then below must be true. The two formulations of ^
 - Formula of Universal Law says that you should do the maxims which you know can be a universal law. It's something that any person regardless of situation, should be able to subscribe to. Everybody should follow.
 - Formula of Humanity: You should act so that you treat humanity and rational ends in themselves and never just as a means.

10/12 - Week 2

- Kant is saying that the good is the good will, which means something is good in it of itself, not because of the consequences of it. Something is good in it of itself if it's a moral act and a rational act.
- In our honoring of the good will, we are bound to the act of making rational acts.
- You can think $2+2 = 5$ and you could believe it, but Kant would say you're just wrong. And same can be applied with ethics, you can believe things, but you'd be wrong.
- Kant is big on the difference between happiness and rationality. Why do we have rationality when if we just use instincts that would get us happiness.

10/15 - Week 3

Lecture

- Abortion is defined as medical treatment intended to induce the termination of a pregnancy, except for the purpose of producing a live birth.
- Two court cases that have changed the abortion laws are Roe v Wade and Planned Parenthood v Casey.
- The federal law in America is the access to abortion is recognized as a constitutional right, up until the point of fetal viability (23-24 week mark).
- Abortion is legal up until fetal viability (because of the right to privacy), but after fetal viability it is generally illegal (special consideration for well being of the mother).
- Marquis first starts with his thesis+method, and then the summary of the current literature, gives his new proposal, and then considers counter-arguments.
- Marquis's thesis is that abortion is seriously immoral and in the same category as killing an adult human being.
 - His thesis relies on the assumption of whether the fetus has a moral status (Basically, is it a serious wrong that end that thing's life). What features of the fetus give it that status?

- Marquis wants to find the property or features where the subject has moral status and the presence of those features makes it immoral to kill that subject.
- Some common mistakes authors make
 - Recommendations are either over-inclusive or under-inclusive in terms of the things that fit under the having moral status characteristic.
 - Even if you find features, there is no good philosophical argument to explain why those features should be of moral concern to us.
- Examples of failed arguments (trying to find features that give a subject moral status)
 - Anti-Abortion (Tend to be over-inclusive)
 - “It looks like a baby”: There are a lot of other things that look like a baby but don’t actually have moral status. This is an over-inclusive designation.
 - “It has a human genetic code”: Human cancer cell is an example of something that has a genetic code but we’re okay with killing it and we don’t give it moral status. This is an over-inclusive designation.
 - “Life is present from the moment of conception”: This is just an ad-hoc definition of the starting point, but there’s no justification for why human life starts at that moment. Need to connect this moment to the moral status characteristic.
 - Pro-Abortion (Tend to be under-inclusive)
 - “It does not possess the characteristics of personhood”: This is under-inclusive because things that we do think have moral status (babies, infants, etc) don’t necessarily fit the criteria for personhood.
 - “It is not a social being”: Also under-inclusive. A hermit is a good example.
- Marquis’ big positive argument is to ask why it is wrong to kill an adult human, and that the wrong-making feature of a killing is the loss to the victim of the value of its future. Then, he’ll show that killing a fetus would be the same thing.
 - What makes it wrong is not the effect on the family or relatives or anything, but rather the loss of the victim’s future, experiences, etc.
 - Then, he says that the fetus has a valuable future which is lost when it is aborted. Therefore, aborting or killing a fetus is wrong in the same way that killing an adult is wrong.
- Application of the above theory to other cases
 - When you try to test this with the animals situation (is it okay to kill animals based on this logic), the conclusion would be that you shouldn’t kill animals with higher level functions because they also have futures.
 - When you consider active euthanasia, this logic would say that it is okay, because that patient does not have a good future and thus it is okay to kill them.
- Marquis also wants to prove that his argument is not just ad-hoc and that dying is bad because of the loss of future experiences. He gives the example of talking about patients with diseases and how many negative emotions associated with thought of dying and losing their future.
- His consideration of counterarguments, who will differ on what the feature of moral status is

- The desire account - Wrong to kill things that have desire to live
- The discontinuation account - Wrong to kill because wrong to discontinue experiences of the victim.
- Potential person account - Wrong to kill things that have potential to become people.
- Sentience account - Wrong to kill sentient subjects.
- Another counterargument is the problem correlative variation. Does the wrongness of killing depend on the absolute value of the future that is lost?
 - If yes, then worse to kill a fetus or a 40 year old? Worse to kill happy people than unhappy ones?
 - If no, cannot explain why it's worse to kill a human than other animals.
- Another counterargument is ____

10/17 - Week 3

A Defense of Abortion

- Thomson's Thesis: Abortion is permissible certain situations.
- Method: Avoid the moral status debate by saying that fetus is a person and seeing if we can argue in favor of abortion anyway. Then show that abortion is a conflict between the rights of two people with moral status, and then whose rights/claims should win out?
- Abortion can be broken down into 2 cases
 - Abortion is made in justified self-defense
 - Right to fight for one's life: If mother's life is in danger, there abortion is okay. If your life is being threatened by another person (and that person is innocent, no bad intention, etc), you yourself still have a personal default right to protect yourself. Even if it is uncomfortable to take that other person's life, you still have a duty to yourself to defend your life.
 - Question of body ownership: The fact that the mom is in charge of her body makes a difference.
 - Abortion is made in justified denial of life-support
 - In these cases, the mother's life is not in danger
 - Samaritan Question: If you had to lie next to someone for an hour or they die, then you'd do it. But maybe not for 9 years. But for 9 months, does it just depend on whether you are a good samaritan.
 - Responsibility Objection: Mother sometimes does nothing to invite it, and does not want it. But others would say that you took part in an act that could have a certain consequence.
 - Special Relationship Objection: With a parent and a child, there could be people that say that there is some sort of obligation the role entails. There is a special moral obligation that the violinist case doesn't have.

Lecture

- Moral status is the property of counting in our moral decision-making

- Is the object more like a rock which you don't care about, or is it more like an animal where we think more about its feelings/moral status.
 - Its interest and its right to not be killed is put on the table if something has moral status.
- When we ask if a fetus has moral status, we are asking if there is a moral presumption against killing the fetus.
 - Aka should the fetus matter in our moral decision making.
- What are the set of features that whether present or not, determine that the object has or doesn't have moral status.
 - If we declare feature X and we show the fetus has X, then there is a presumption against abortion.
- But in trying to determine the features that ground moral status, most answers are:
 - 1) Over-inclusive or under-inclusive of the subjects who we want to count as having moral status
 - 2) Can seem philosophically ad-hoc. (Not clear what the connection is between the feature and the fact that we should care about the subject from a moral point of view.)
- Possible features
 - Capacity for consciousness
 - Forms in weeks 20-28 when neuronal synaptic connections form in the fetal brain.
 - Argument is over-inclusive because there are lots of animals that are conscious beings that have a sense of self-awareness and thus they would fit the definition. So, if you believe this, then you have to also believe that killing most animals is not right.
 - Possession of rationality
 - Argument is under-inclusive because infants and some adults with disabilities wouldn't be included and we would be allowed to kill them.
 - Potential Personhood
 - But why is potentiality something that should matter? Somewhat ad-hoc. Just because something is a potential X doesn't mean that it should get the same rights and protection as X.
 - Possession of a future of value
 - Explains the morality of euthanasia and presumption against killing certain animals.
 - Characterization of being a human organism
 - Why does being a human matter? And are we being prejudiced to the species of humans?
- Dworkin says that your view on abortion depends on your view about whether a human possesses intrinsic value.
 - And thus there is a point where two people won't agree on whether something is an intrinsic value. One person will just believe and the other person won't.
- He says there are 3 types of values: Instrumental, Personal, and Intrinsic

- Instrumental: Something is valuable because it is a means to something else
 - Personal: Valuable to you?
 - Intrinsic: Something that has value that is objective
- He says that abortion ought to not be outlawed since the reasons are not accessible to everyone under the law.
 - There has to be some sense that the reasons are understandable to everybody.

10/19 - Week 3

- An assumption is a claim that you're making without need for justification.
- To Marquis, abortion is a killing. And so to figure out the ethics of abortion, we should examine the killing. Does fetus fall under the category of things it's okay to kill? If we say yes, then that's our argument.
- Killing is wrong because of the loss of a future like ours (FLO).
- Marquis is arguing that FLO is valuable and if you end someone's FLO, you're taking something valuable away from them.
- Marquis argues that the fetus has FLO.
- Marquis says that for euthanasia, if you use FLO as your evidence, then those terminally ill patients have no FLO and thus it's okay to kill them.
- People say that if Marquis holds this view, then you view contraception as being wrong because those sperm and egg cells are being killed, and don't they have a future?
 - But Marquis says that the sperm and the egg cannot develop on their own and can't survive on their own, and thus they have no future.
 - And then the other side can say that a fetus or even a born infant can't survive on its own.
- Thomson's main argument relies on the RTL > RTB, and says that abortion flips it and so abortion is wrong.
- (First person example case) In the case where the mother's life is at risk, Thomson says it's okay because you yourself have a right to your own life.
 - Tiny house example
- (Third person example case) In this case, it is okay as a third party to give the thing to the person that it belongs. Restore to right to whom the thing belongs to (aka 3rd party can help the mother take her body back in the case that her life is at risk).
 - Fighting over one coat (aka mother's body)
- People think RTL = You have a right to whatever you need to stay alive.
- Thomson, though, says that it is the right to not be killed unjustly.
- Fetus needs a just claim on the mother's body. So we need to ask whether it has a just claim, and how a fetus would have a just claim?
 - Open window and burglar case
 - Thomson argues that you don't get just claims to bodies accidentally. Body being accessible does not give people rights to it.
 - Thomson believes that you need to consent for someone else to use your body.

Midterm Prep

James Rachels (**For active euthanasia**)

- Main argument: If you accept passive euthanasia, you should accept active euthanasia as well because the two are not morally different from one another.
- Once decision is made to not prolong agony, then active euthanasia is preferable because the amount of pain is less.
- To address the counter-argument that some may have about how killing someone is morally worse than letting someone die, Rachels describes the bathtub case and how both people in the situation are equally at fault morally (and the only difference is the act of letting die vs killing).
- Rachels also says that people learn of killing in a very negative light while we don't hear the stories of letting people die.
- To address the counter-argument that people may have about with active euthanasia the doctor is actively doing something to bring about the patient death, Rachels talks about how inaction can be viewed as an action.

Ezekiel Emanuel (**Against active euthanasia**)

- Talks about the 4 myths: People think it's physical pain but it's more psychological distress (and thus death is more like suicide). People also think assisted suicide is the result of advanced technology. People think that assisted suicide will improve the end of life for everyone, but author says that statistically, this isn't a very popular way of ending life. People think assisted suicide is a quick and painless way to die, but author says things can go wrong or can take a long time.

Bentham (**Principles of Utility**)

- Everything is pain and pleasure and thus

Pettit (**Consequentialism**)

- Proper response is whatever values you think are good, then you should make the acts that promote them.

O'Neil

- She says Kant says you should act in a way where you treat others as an end and not a means.

Marquis (**Against abortion - abortion is immoral**)

- Abortion is on the same level as killing an adult because the victim loses the prospect of its future like ours,
- Talks about how arguments against abortion are too broad and over-inclusive, and the ones for abortion are too narrow.
- There are lots of debates on the biological and physiological characteristics that make something a human.

Thomson (**For abortion - abortion is okay**)

- Thomson puts aside debate of whether or not fetus is a person and allows that premise, but that says that even though that is true, it is still okay to perform abortion.
- She then addresses counter-argument that says RTL > RTB and thus abortion shouldn't happen. Then she brings up the violinist case and says that here there isn't as clear a line for RTB and RTL.
- Reasoning for if the mother's life is in danger, then you should have RTL for yourself
 - Growing child in a tiny house example
- Reasoning for third person making the distinction
 - Two people are fighting over a coat and a third party can say that the owner should have it.
- Reasoning for why right to life is something that should be examined more
 - If I have right to life and the only thing that will save me is Henry Fonda's touch, I still have no right to his body even though I have RTL.
- Reasoning for justness of having claim to someone's body. Is abortion an unjust killing?
 - Box of chocolates and the two kids

Essay Prep (**Active euthanasia**)

- FOR voluntary active euthanasia
- Thesis: In this essay, I will argue that voluntary active euthanasia is morally permissible because active euthanasia is not morally worse than passive euthanasia, the amount of suffering/pain for the patient decreases, and the patient has more autonomy
 - Reason #1: active euthanasia is not morally worse than passive euthanasia
 - Talk about how Rachels gives the example of the two men
 - Reason #2: the amount of suffering/pain for the patient decreases
 - Say that if decision is made to not prolong life, then main consideration becomes the amount of pain the person goes through
 - Reason #3: patient has more autonomy
 - Can make the choice for their own way of treating their body
 - Talk about how Brittany Maynard was a patient suffering from brain cancer and how she asks "Why should anyone have the right to make that choice but me?"
- Address Counter Args
 - Does patient really have autonomy if they are choosing this route?
 - Cause of death is now doctor instead of the disease

Essay Prep (**Abortion**)

- FOR abortion
- Thesis: In this essay, I will argue that abortion is morally permissible because the right to life is not more important than the right to body in self-defense cases, abortion is not an unjust killing, and
 - Reason #1: the right to life is not more important than the right to body

- People automatically assume that a fetus's right to live outweighs the mother's right to body.
 - Violinist example?
- Reason #2: abortion is not an unjust killing
 - While fetus does have a right to life, doesn't mean you are necessarily allowed the continued use of someone else's body.
 - Chocolate example - That person you are plugged into has no right to use your body
- Reason #3: autonomy of mother over her future
- Address Counter Args
 - Fetus does not have any autonomy
 - RTL is more important than RTB

10/24 - Week 4

Lecture

- The human embryo is the stage of development between fertilization and the 8 week period of development.
 - Basically first 2 months of pregnancy.
 - Most of the typical formation of the human. The actual systems of the human start to differentiate.
- Collecting eggs from a female is an invasive process.
- When the sperm and eggs are fertilized, they are inserted back into the mother.
- More embryos are created than the amount implanted, and most of them are leftover and don't get implanted somewhere.
 - These are the ones typically used in scientific research.
- Most nations have a rule saying that you can't use the embryo if it's been growing for more than 14 days and has not been implanted yet. That is the mark at which the embryo has become an individual.
 - Now scientists have the ability to keep it alive for more than 14 days.
- The main ethical question is whether the use of embryos to extract a certain set of helpful cells is ethical. Because the extraction of the cells is what causes the destruction of the embryo.
- Stem cells have 3 different properties
 - Capable of dividing for long periods of time. Once you have a established stem cell line, then you can keep them dividing for a long time.
 - They are unspecified cell types. What they are going to do in the body is still undetermined.
 - Can give rise to specific cell types. We can manipulate it based on what sort of cell we need.
- Adult vs embryonic stem cells
 - Adult ones found in the fully formed human body. They are cells in a particular organ but aren't fully specific yet.

- Embryonic ones are capable of generating any and all body cell types. These are pluripotent cells. Thus, they have a much broader use.
- Adult stem cells are differentiated way more than the embryonic ones.
- Lots of possible uses of stem cells in research
 - Understanding physiological processes
 - Drug testing
 - Regenerative medicine
 - Alzheimers/Parkinsons
 - Diabetes
- If you have a disease where certain cells are not functioning properly, that is a possible use case for stem cells.
- Most embryonic stem cells that are extracted are from fertilized eggs.
- If we allow people to be egg donors in exchange for money, that is going to have a certain population that would be interested.
 - Low income and poor neighborhoods
 - Women also bear a lot more of the burden.
- Embryos created through IVF can't turn into a person.

Elizabeth Harman

- Abortion ethics doesn't answer the hESC issue.
- If you are consequentialist, then you can talk about the enormous research benefits.
 - Harman is a deontologist though.
- She says that she agrees with Thomson in that abortion is permissible.
- The difference between this and abortion is that there's no other party involved.
- She says there is a difference between embryos that are created for research purposes may be different from those that are just leftover.
 - In the case of leftover, other people say they don't stand a chance at being implanted, and so the best use is to actually use them. However, she says hold up. Just because they can't be a person, it does not make it true that we can do something harmful to them. It is against the embryos interest. The fact that they would be harmed by just leaving the embryo in the freezer isn't an excuse for us to say it's okay to harm them by destroying them for research purposes. However, she also says that it's such a small chance of the embryo to get to an adult that the degree of harm does not really register in the moral framework.
 - The more important issue is creating embryos just for the purpose of research. Harman says there is a sliding scale of moral status. Even though embryos may have low moral status, there is still harm being done to an embryo. By planning to create it, knowing it requires aid to survive, not giving that aid, and then destroying it, that does such a great amount of harm to the embryo that we can't let that happen. She thinks that it is not permissible from a deontological POV.
 - Thomson counter is that the mom giving that aid is such a big requirement from her end and we can't ask that of her.

- Harman has an ever conscious view of moral status. It has moral status at that particular time if at any point of time it will become conscious in the future.
- Harman main goal is that destroying the embryos is permissible because they don't have moral status.
 - She tiptoes around saying it because she has a lot of other subtleties to the argument and the counter argument that is different from the Thomson approach.

10/26 - Week 4

- Discussion of the Harman piece
- If you imagine a timeline of a creature life, then the first point is conception, and the last one is death. Any line that you draw about whether the thing at that point has moral status is arbitrary and thus the moral status at any two points should be the same.
 - However, she gives the example of the acorn and the oak tree, and says that in that development, you can't say that an acorn has the same rights as the oak tree. There is a difference, and thus you can draw lines.
- Harman is saying not to dismiss the embryo seriously but at the end of the day, she still thinks using them for research is permissible.
- Harman makes a distinction between embryos that are leftover and those created just for research.
- For leftover embryos, the common understanding is that the embryos are going to get harmed anyway and thus it's okay to destroy them.
 - Harman makes the response with the two assassins argument by saying that if a person wants to kill someone and misses then you're still not morally free. But at the end of the day she still thinks it's okay to use the embryos because there's such a small risk of you harming the embryo.
- For created embryos, Harman makes a distinction between moral status and harm.
 - Dandelion gets harmed if you put a picnic table over it? Yes. However, is it still moral? No, because they don't have moral status.
- So for embryos, we need to look at if we are harming the embryo and then if it has moral status.
 - Do we have embryos by creating them to destroy them?
 - Harman says that because you intentionally create something that you know needs support, but you deny it support, that's not right.
- A common way to look at moral status is sliding scale of things that have moral status. Common way to look at it is that if a thing has more moral status, then there is more harm if you create/destroy it.
 - However, Harman says if something has a potential for a lot of harm, then even if it has little moral status, then you still do a bunch of harm.
- Then, Harman talks about how can we determine if something has moral status
 - Ever Conscious View: If A is birth and B is death and it becomes conscious at any point in between, then it has moral status throughout A and B.

- If you create/destroy something before that point of consciousness, then it's okay because it never reached the point.

10/29 - Week 5

Lecture

- Today's discussion is about if it is morally permissible to screen and select different cases where you screen for genetics and do selective abortion.
 - More specifically, is it morally permissible/required to prevent/select for the birth of a person on account of some fact about the person's genetic profile?
- 3 Methods of Selectively Preventing Birth
 - Prevention of conception
 - Based on background info of yourself and your partner
 - If you know you have certain negative genetic characteristics then you should have 2nd thoughts about having kids.
 - Screening and selection of embryos during IVF
 - After a number of embryos are created through IVF, you can screen those embryos for markers for certain diseases, and choose not to implant some. This can be used against frequency of negative traits, but can also be used to select for positive traits that have a genetic basis.
 - Prenatal genetic screening and selective abortion of fetuses.
 - Terminating pregnancy based on the genetic info that comes back.
 - Non-invasive prenatal testing is offered.
 - Genetic engineering is a 4th option but it is still in research. It is basically giving people the chance to edit the genetic information for an embryo after it has been created.
- Even if you're against abortion, you could be of the crowd that would be okay with abortion in certain circumstances, and this might be part of those circumstances.
- There are more general acceptance of selecting to prevent harmful and painful diseases than selecting to prevent hair or eye color.
- The movements that have strong opinions on this debate is the reproductive right and freedom movement that says that parents should have a lot of control over this stuff. The disability rights movement says that there has been a lot of discrimination of disabled people and that there is a socially constructed concept of disability and that we have a control over the quality of life of these people and if people in society work to include people, then being disabled may not actually be that bad.

Purdy

- Main point is that if you know a disease runs in your family and that your children will have a high risk, there are certain circumstances where you are morally wrong to conceive a child in the first place.
 - She thinks it's wrong to bring people into this world that have genetic dispositions.

- The main example she gives is Huntington's Disease.
- Purdy's 3 arguments
 - Parents have a duty to provide their children with a minimally satisfiable life.
 - You're violating the duty if you knowingly conceive them even when you know you can't provide it
 - But what constitutes minimally unsatisfiable?
 - Purdy is going to base ^ on health conditions.
 - Potential persons can't be harmed by not being conceived or brought into existence
 - Possible to harm actual children that come into the world, since they come into the world and they don't have minimal health protected.
 - But not possible to harm potential persons
 - Parental freedom is limited by the moral obligation to #1
 - However, not every desire ought to be fulfilled
 - Value of satisfying parental desire is outweighed by harm to children.
- Does Purdy's argument apply to just genetic information or does external circumstances like climate change, etc, is that a reason against procreating because I wouldn't be providing them with a minimally satisfiable life?
- Also, what possible diseases or conditions entail a basically satisfiable life?
- How far do obligations to the child extend?
- Do parental obligations extend to third parties?
- How should we understand parental reproductive freedom?

Parsons and Asch

- Main idea is that genetic testing and selective abortion is morally problematic.
- 3 Arguments
- The Expressivist Argument
 - The choice to screen and selectively abort sends negative signal to people who currently live with that disease.
 - Policy or practice "expresses" the negative view about disability. Reduces those people to just their condition and this is not valid way of understanding who people are and how many different traits they have aside from their disability.
 - Also undermines attempts to create inclusion of people with disabilities because you're saying that if you can predict someone will have a disability, then it's okay to selectively abort, so your grounds for inclusion become pretty weak.
 - Counter Arguments
 - The choice doesn't send any signal and is just a very personal decision that does not send any signal about how things should work from a general sense.
 - No abortion is permissible because there will always be negative messages sent to different populations about any possible reason for an abortion.

- Cannot explain why abortion to prevent disability is bad, but other interventions are acceptable (tell mother to take medicine to prevent disabling conditions).
- The Parental Attitude Argument
 - We endorse a wrong understanding of parenthood if we allow parents this much control.
 - Parents isn't about choosing the child you get or don't get, it's about caring for the child you will have.
 - Proper role of parent is to accept the child that you get. You should take the child and support them in whoever they may be.
 - Being a parent isn't really about the parent, it's about helping and supporting the child. It's not about satisfying the desires of the parent.
 - Counter Arguments
 - There is a projectionist view in that you can view your child as an extension of yourself. You can have a child because that's what you want in your life.
 - Some people value having extended families and being grandparents.
- The Misinformation Argument
 - Selective abortion is based on misinformation on what it's like to live with a disability or live with a disability in a family.
 - Individual Perspective: Reasonable to think that if you ask a person with a disability, then most people would say yes. Having a disability does not automatically equate to a negative life.
 - Family Perspective: You get the same range of experience from families with a person with a disability and typical families.
 - Societal Perspective: Medical model views disability as a sort of biological characteristic while social model says that disabled people vary the same way that normal people do. Why do we look at the traits for disabled people more than others? We, as a society, make that choice to pay attention to some traits more than others and then treat people differently. The social impact is more than that of the actual biological difference. If the rest of us acted differently, this wouldn't be as much of a problem.
 - However, can all of disease/disability be explained by social construction?
 - We have this societal view of normalcy.
- After making arguments against the moral permissibility of selective abortion, they make policy recommendations.
 - Harm based approach: Okay to abort if the expected harm of keeping the child is more than the harm from ____.
 - ADA baseline approach: Something about following the standards for disability that ADA provide.
 - Genetic counseling and education approach: Provide resources to help parents with the decision.

- They don't really say anything besides that it is a complicated issue and we should provide parents with the help and education they need.

10/31 - Week 5

Lecture

- When thinking about if we can select against negative traits or if we can select for positive traits, Purdy says that we are morally obligated to select against these negative traits.
- Purdy says that the parents need to make sure that the child has a minimally satisfiable life with regard to health and physical wellness.
 - If you know that you have a positive risk for a disease, then you having the kid would violate the duty for the kid to have a minimally satisfiable life.
- It's unclear for what genetic traits cross the line in terms of preventing a satisfiable life. Some traits will allow you to live fine, but with some discomfort. What do we do there?
- In the Parens and Asch piece, they say that the selective abortion due to genetic testing is morally problematic and is driven by misinformation.
- Another discussion is whether it's okay to select for positive traits
 - Yes
 - Reproductive freedom: It's my life, my body, my choice
 - Conceptions of parenthood.
 - Positive parental obligations to future children: You owe it to your children to provide the best resources for you kids. What's the difference between that and choosing the best school for your kid?
 - No
 - Social construction of disadvantage: Types of people that have access to this are already living the most privileged life.
 - Single trait v.s whole person: If you knew you only come into the world as someone with a particular trait, you wonder whether that is the only thing that defines you.
 - Slippery slope of positive trait selection: If we accept a little, there is no line to be drawn.
- Genetic engineering focuses on practice of genetically modifying an already living organism and change its genetic code so that the expression of characteristics changes.

11/2 - Week 5

- Certain actions, with respect to ethical theories, can be permissible or forbidden or required.
- Disability right critique says that if you know your kid is going to be black or of a certain race, you wouldn't abort the child because they're being born into a racist society. This is the same thing as bringing a disabled child into the world that is ableist.

11/5 - Week 6

Lecture

- Genetic engineering refers to any attempts to curtail or select for the expression of particular traits.
- In the early 20th century, there was forced sterilization in attempt to prevent the passing on of genes that promote negative characteristics.
- Most of genetic engineering revolved around preventing people with negative traits from procreating as well as encouraging passing down of positive traits.
 - Nowadays, tech has made it so that we can edit actual genes due to the Crispr innovation, which moves the focus from procreation to just editing genes in order to alter its expressed characteristics.
- Current approaches can deactivate a certain gene but the future hopes to be able to replace a gene with a positive one.
- Difference between somatic cell engineering and germline engineering is where somatic cells can be modified and they are not able to pass down info to future organisms, while germ cells are reproductive cells and can affect future genomes.
- 4 Ethical Issues associated with germline genetic engineering.
 - By making changes to germline cells, we're manipulating the gene pool available to future generations without their consent.
 - By making conscious changes, there could be diversity loss in genes.
 - Insert 3
 - Insert 4
- When it comes to somatic cell genetic engineering we need to think of the tradeoff between risk mindfulness and scientific progress.
- There is Institutional Review Board that looks at these issues.
- When it comes to risk associated with a behavior, is there a standard for how much risk should be allowed and what consent is required.
 - There should be informed consent, socially worthy research, should minimize risk as much as possible, and there should be a risk/assessment
- Is risk even objective in nature?
- There can be a variation of risk assessment from person to person. Expert opinions differ from those of non-experts.

Mavilio and Ferrari

- Worry that when we try to modify the human genome, we don't really know what the consequences are and if we can do it successfully. Unintended effects can frequently cause types of cancer.
 - A number of patients in a study ended up getting leukemia.
- Other intended effects could be off-target mutations.

11/7 - Week 6

Lecture

- Neuroethics is the study of ethical problems in the neurological sciences.

- It's special because it's itself the seat of the mind/individual/person. Brain is very unique and is necessary organ for life. People's preferences, desires are located in the brain. When we intervene in the brain, we're intervening in the physical foundation of the self.
- Concept of autonomy coming from Greece and the independent rule of city-states. They are units in themselves and free to do as they please with other city states.
 - Viewed as we view individuals in the common era.
- As people, we have desires or impulses that cause us to make certain actions.
- Greece said that the moral person doesn't just go toward every desire or impulse that they feel.
- Split-Level Theories
 - Divide our impulses into first and second order ones. First level would be to lay on your couch and relax (immediate instincts or inclinations that you have at that point in time), while 2nd refers to the desires you want in the long term like being a good friend or being honest. 2nd level desires should be the ones moderating your first level ones. An autonomous person is someone who makes choices based on the 2nd order desires, not the first order ones. They are more deeply linked to who I am and who I care about.
 - How can we explain our weakness of will when it comes to following through on those 2nd order desires?
 - Decisions can either be authorized or endorsed by the person, as a function of what their 2nd order desires are.
 - When we make a decision based on a 2nd order desire, they are endorsing and authorizing.
- B/C Critique
 - First order desires can seep into the 2nd order desires of what a person wants.
 - There is also some misrepresentation of a 2nd order desire as just a higher level process.

Beauchamp and Childress

- They have a 3 condition theory of autonomous choice. These are conditions that need to be present in order to say that an autonomous choice is being made.
 - Intentionality/Plans: We act with intent. There needs to be some goal and then a plan for how you can reach that goal. This is a yes/no answer (did you make a plan or not)
 - Understanding of the action and the context of the decision being made.
 - Non-control: No external or internal control, but influence is okay. No coercive threats are allowed. There can't be anything that they wouldn't personally endorse on the second order level. There are a lot of things that influence our decisions though (our environment, our parents, our society, things that exist outside).

- But what is the difference between influence and influencing them in a non-acceptable way. (holding a gun to your head vs some sort of external advertising)./
- Understanding and non-control are not necessarily binary but more on a sliding scale, and thus autonomous choice in general is on a sliding scale as well.
- There are some forms of external control which are okay. If people endorse or are part of the formulation of the law that you're under, then being coerced to that is okay because the structure and direction is coming from you.
- If a patient requests patient autonomy, then it generates positive and negative requirements from the physician side.
 - Positive requirements: There needs to be a lot of disclosure and communication with the patient. They need to tell the truth to patients (necessary because people's actions will get affected and people can make informed decisions). When asked, help with decisions.
 - Negative requirements: Can't operate on patients without their consent. Have to respect the confidentiality of their information.
- There are potential cultural considerations to come in mind during the patient physician interactions because words can affect people from different cultures differently.
- There are some complexities regarding consent.
 - In some cases, consent is not necessary if you have an emergency situation where they can't give consent, but it's in the interest of the patient to actually do something.
 - Sometimes, consent is also not enough. An example is when you have a really risky procedure.
 - Also there are different types of consent.
 - Spoken consent, implicit consent through actions, tacit consent through lack of objection, and presumed consent based on objective goods based.
- How should we understand consent/refusal relationship over time?
 - What do we do with a patient that changes their mind. If patient wants to go off dialysis and then wants to go back on, what should we respect.
 - We have to analysis in character vs out of character choice. Was the person at the end "different" from the person who made the request at the beginning.
 - Counter is that even though the character is different, why don't we still treat that with respect?
- As the amount of risk with a procedure increase, then the amount of competency when it comes to the choice must increase as well?
 - If the patient shows themselves to be competent, then they are giving informed consent.

11/8 - Week 6

- In philosophy writing

- Important to define common words that may be defined in a specific way within the context of the argument.
- Arguments are informed by particular types of moral theories. It is important to look at what theory underlies the argument that you are making.
- Express the opposing argument in the best light possible.
 - If we don't, we do a disservice to the task of truth seeking
- Make claims very transparent in the beginning. Be clear about what you're trying to prove.
- Tay Sachs
 - Morally permissible because parents have a duty to provide their children with a minimally satisfiable life in terms of health, and you're not doing that if you know there's a high risk of the baby having this disease.
 - Also permissible to do gene editing
- Down Syndrome
- Blindness

11/14 - Week 7

Lecture

- Relationship between neuroethics and the philosophy of the mind.
- What is the relationship between the mind and body and how do we define those two things?
 - Are they separate and different entities and how do they relate to each other?
 - We presume that there is an existence of mental states (emotions or desires or sensations) and there is the existence of the physical human body. The brain, specifically, has a physical existence and we know more empirical facts about how the brain functions. We make a distinction between the mental and physical states.
 - Physical states don't seem to completely explain your mental states. The physical description of the brain can only get us so far in our understanding of the mental state.
 - If someone lives in black and white room and a person has complete knowledge of color, and then she goes outside and sees a green tree. Some people will see that the actual experience is totally different and that she had a new experience.
 - There is something to the actual first person experience that is different from the 3rd person approach. The first person experience is called a qualia. This is something that attaches to internal states and you cannot get it through 3rd person experiences and the science of color.
 - Therefore, there is a difference between physical and mental states
- Dualist approach says that mind and body are two separate but interacting entities.
 - Mind is responsible for emotion, reasoning and sensation.
 - Body is the physical entity which is measurable.

- Mind-body interactions is the casual relationship that goes in both directions. Changes in physical state can affect mental state and vice versa.
- The critiques of this approach
 - Idea of mind that does not exist in space and time seems out of the ordinary.
 - How do we explain the causal interaction between the two?
- Physicalist Approach says that we are just physical brains and bodies. Mental states are just physical states.
 - If we have all this info just from physical tests of the brain, is there a question of privacy? Is there privacy regarding mental states if everything really is just physical?
- Also, what is the self? How should we understand the self over time (because people change)?
 - If you define the self as the emotions, desires, reasoning capacity, those set of things changes as you grow older even though you are the same person.
 - How do explain why the self changes over time?
 - Memory is a component on psychological continuity over time which can address the ability for a person to be the same at different times.
- What is an authentic or autonomous self?
 - To be an authentic self, there has to be reflection or endorsement of the set of psychological facts about the self.
- There are certain drugs that alter the process of memory formation and storage. It's something that blocks the rising levels of norepinephrine. You can also blunt the emotional associations with memory.
 - This could be used to prevent trauma in military and first responders. And there could be modulation of undesirable stress responses.
 - Counter is that we want people to experience fear/stress because it can affect their overall decision making.
 - If understanding yourself and who you are depends on your memories, then how does ability to change memories affect things?

11/16 - Week 7

- Underlying all moral arguments is some sort of moral theory.
- Neuroethics is problematic because we are messing with people's identities.

Midterm Prep

Essay Prep (Selective Abortion on Genetics)

- FOR selective abortion
 - Thesis: In this essay, I will argue that selective abortion based on the results of genetic tests is morally permissible, only in cases where the health of the future child is at risk, because parents have obligations to future children in terms of

their health, no harm is done to potential persons that aren't conceived, and reproductive freedom is valued.

- Reason #1 (Laura Purdy: Genetics and Reproductive Risk): Parents have a duty to provide their children with a minimally satisfiable life in terms of health.
 - Give example of if a kid has Tay-Sachs there will be a large amount of pain and likely early death. Thus, parents haven't done their duty. You're violating the duty if you knowingly conceive them even when you know the child won't have it.
 - Counter: There are societal and external factors that affect child's ability to .
 - While abortion based on those characteristics, there could be a slippery slope. However, if we limit to cases where child's actual health is in danger, then that is hard to argue against.
- Reason #2 (Laura Purdy: Genetics and Reproductive Risk): Potential persons can't be harmed by not being conceived or brought into existence
 - Possible to harm actual children that come into the world, since they come into the world and they don't have minimal health protected.
 - But not possible to harm potential persons
- Reason #3: Parental reproductive freedom is valued.
 - As parents, they had the choice of deciding to have a baby and so the ability to selectively abort based on some information is something that values the autonomy of the parents.
 - Creates situation where if parents are made aware of negative health conditions in their child, they are able to take action rather than being helpless. Not only saves the child from pain but also allows parents to take some control.
 - Counter: Shouldn't have this much control as parents and that it isn't up to you to determine what your child should be and rather you have to make do with what you get. However, people view your child as an extension of yourself. You can have a child because that's what you want in your life.

11/28 - Week 9

Lecture

- There is a connection to political philosophy in that should individual physicians go against the status quo politically.
 - As a physician, you have a duty to not obstruct justice though.
- In the U.S, healthcare is not a right.

- So should there be access to basic healthcare provisions, even if there isn't currently.
 - If so, the rest of us should provide so that everyone has that right.
- If you want to answer the question about whether it should be a right, then that depends on what background theory of justice you follow.
- Libertarianism - All humans have a set of natural rights, and these can't be taken away without that person's consent.
 - Recommends for a minimal government, only the security required to protect property rights.
 - Compulsory taxation is something that libertarians hate, and they think of it as stealing.
 - Universal healthcare wouldn't happen, unless every person agreed to taxation.
- Utilitarianism - Maximize preference satisfaction.
 - Something should be protected as a right as long as it leads to a good outcome.
 - The rights, however, aren't really set in stone since it is dependent on the expected outcomes.
 - Can, and mostly likely would, support a right to healthcare since we can help a great number of people.
- Basic Rights View - Humans need a right to health before anything.
- Egalitarianism - Different definitions, but one view is equal opportunity view. A just society makes sure that the starting places of every person is equal so that they have a chance to lead a good life. Nothing should influence the level of opportunity a person has.
 - Race or sex or religion are arbitrary from a moral POV and they shouldn't impact level of opportunity.
 - Health is also one of those ^. Just because someone has a disease and another doesn't, shouldn't impact the equality.
- Individual has a duty to support social institutions.
- You don't have the responsibilities to do stuff on your own, but work for change in the institutions.
- Virtue ethics is the 3rd theory of ethics. The right act or decision is that which the virtuous agent would make.
 - Somewhat fell out of favoring Modern philosophy where reason and rationality was preferred.
 - Agent centric theory as opposed to an act centric theory. Main difference between virtue ethics and the other two theories.
 - Deontology and consequentialism focus on the act itself, whether the act follows rules or whether it maximizes pleasure.
- Virtue ethics focuses on shaping the person into the best moral person. Then, whatever that person does is the right thing to do.
- Any particular act can be okay or not okay, but rather it depends on whether that act come from the thought process of a virtuous person.
- Virtue ethics terms

- Character is the totality of person's identity.
- Virtue is any morally good trait that is part of the character
- Habits and education are the methods by which virtues are acquired. It's also through experience that people learn how to make the virtues a part of their life and character.
- Virtue ethics relies on the idea that it's not really possible to specify the truth of what is good and what isn't good in the world. There is no ethics manual that can list out everything in advance. Therefore, we need to rely on the discernment ability of the moral decision themselves. We need to shape them and trust in their ability to make the moral decision. After they are trained in this way, then we can trust they will make good choices.
- Virtue ethics is purposely vague since they aren't saying any recommendations about any act, but rather you have to make yourself into a good person and then go with your decision.
- The pro side to virtue ethics is that it is the only theory that can really capture all the moral complexity of the world, albeit being very vague.
- The negative side seems that virtue ethics is being very hands off and isn't committing to any one action, which you can claim is a positive one. There's no concrete system of rules.
- There are 4 principles of medical ethics. These are ethics that we always have to take into account.
 - Respect for autonomy
 - But what is autonomy
 - Nonmaleficence
 - "Do no harm". But what is harm?
 - Is there a difference between wronging and harming?
 - Beneficence
 - "Do good". But what is the difference between a harm and non-benefit, or between a benefit and a non-harm?
 - Justice
 - Make the world a more just place.
- Truth telling in medicine. Doctors have to deliver bad news and sometimes it is better to not tell the whole truth.
 - Technical Difficulty Argument - Not a great argument
 - Patients Don't Want to Hear Argument - Making assumptions
 - Truth Can Harm Argument - Plausible
- Higgs' thesis says that it can be morally permissible to not tell the whole truth.

11/30 - Week 9

- Make one unifying argument in the essay and make sure that you view all the cases through that lens.

- When people talk about healthcare, the main issue is whether people should provide something for others.
 - The moral issue is autonomy and being able to make your own choices. In this case, you'd be requiring something of another person.
- Libertarian view says that no healthcare, unless everyone consents to it.
- Rawls says that if you don't know any traits about yourself, then you would choose the one where everyone is equal and you would choose the system where everyone gets the basic needs, but not everyone is equal in terms of how much you're above the minimum. You have the opportunity to go far above that.

12/3 - Week 10

Lecture

- We do experiments on non-human animals so that we have a testing ground before we test on humans. The justification is a cost/benefit analysis. We can gather information by testing particular subgroups, and while those subjects may suffer, human beings in the long term will be better off with that new information.
- Mice, rats, fish, and birds are 96% of the animals used in research.
- In 2013, NIH ended use of chimps in research, but people say that chimps aren't the only nonhuman animals that are used, so we might want to reconsider this.
- Animal Welfare Act talked about maintenance conditions for the animals, how you obtain the animals, etc.
- The infliction of pain on animals is permissible but must be justified in a utilitarian context.
 - Has to benefit human beings in the long term.

Peter Singer - All Animals Are Equal

- Argues for recognition of the respect of animal rights, arguing for a liberation argument. Liberate nonhuman animals is the next step.
 - Liberation is the expansion of rights to a group that didn't originally have it.
 - Before a liberation, members of that subgroup don't have moral status, and thus that is the justification they don't have certain rights. Once they are liberated, they have the status.
- Singer mainly says that we should extend to other species the basic principles of equality that most of us recognize should be extended to all members of our species.
 - Nonhuman animals need to be treated with moral status. They haven't been recognized in this way before.
- 3 Arguments for Racial/Gender Equality. Is moral equality equal treatment? No, just because two things are equal doesn't mean we treat them to exact same. It requires equal moral consideration of their interests. If pigs are equal to humans, we still don't give them right to vote.
 - For the people who say that all people are equal, Singer says this isn't true.

- For the argument that all groups are equal, Singer says that group identity does not tell us anything about individual identity. Some men and women are superior in some ways to other men and women. There is nothing you can say about an individual just because of their membership to a certain group. Singer also rejects because if you ground his justification of equality based on the actual performance measure, then you would have to allow different treatment for each type of person.
 - Singer wants to say that if you ever prove that a male brain is better at math than a female brain, then you would have to have different treatment based on this 2nd argument.
- Equality is a moral ideal, not a description of actual fact. It's a theory on how we should treat people, not something based on actual fact. Moral equality has nothing to do with actual equality. The justification is that every being with moral status should be considered equally and its interests should count as much as interests of any other.
 - Singer says that something has moral status if it has the capacity for suffering and pleasure, (rejecting the sliding scale of moral status), and so if a being suffers, there is no justification for not taking that into consideration.
 - Singer says that sentience is the ground of moral status and all other markers don't matter.
- Speciesism is the prioritization of one's own species over others, as indicated by eating animals, experimenting on animals, and philosophical practices.
 - Experimentation normally depends on a cost benefit analysis. Not all experimentation is for vital purposes, such as shampoo in eye testing. Costs to animals outweighs the benefits to humans.
 - Singer agrees that some experimentation will be justified if the human benefit is great. He would also say, though, that you should use infants in this research if you're looking at this from a cost benefit analysis. If you can justify using an animal, what's stopping you from using the infant?
 - Why do infants have moral status while animals don't? Singer says that you have to find a ground for moral status that encompasses all/only humans.

12/5 - Week 10

Singer

- Big argument is that we shouldn't use animals as research subjects
 - Nonhuman animals have moral status since they have ability to feel pain/pleasure and they are sentient creatures. We should hold equal consideration of their interests.
 - If you have equal consideration, then most speciesist practices wouldn't be allowed.

- Currently, we prioritize minor interests of ours over the major interests of the animals.
 - Some experimentation is justifiable if the benefits of the research outweigh the costs.
- One of the ways to counter Singer is to say that animals don't have moral status, and that moral status is only for humans.
 - Potentially/Future Value View
 - Capacity to Enjoy Good Life
 - Intrinsic Dignity View
 - Human Norms View
 - Problem with the above views is that the humans may not exhibit all these traits at all points in their life (some when they are a baby, but not all). However, they still should have moral status because it is a member of the group (humans) and the norm of the group is something we find meaningful.
 - Main reasoning is to handle the marginal cases of exceptional animals or human babies, etc.
 - Nature Based View

Lecture

- There are more protections for humans in research experiments.
- The rules are influenced by
 - The Belmont Report
 - Respect for Persons - they are informed about what the study is about, the people are voluntary, and they have risk protections
 - Beneficence - research has positive potential for doing good
 - Justice - Maintain equity standards
 - The Common Rule
 - Provides guidelines for IRBs for deciding whether human subjects are appropriate for the test
- The rules came about through abusive cases of people not doing the right things.
- "Hwanggate": Woo-Suk Wang claimed the successful creation of patient specific stem cell lines.
 - Research was found to be fraudulent.
 - He violated human subject protections.
 - Some of the donors of the eggs were paid for
 - Then you'd get a certain population -> reinforce separation of class and not able to make autonomous decision because your poverty is compelling you to take a choice that you don't really want
 - Some were junior researchers
 - Not completely voluntary
 - All the donors of the somatic cells had spinal cord disorders.

- Not clear why he did this, but the treatment was not designed to help them.
 - Not good because you're taking from an already vulnerable population and it's not something that's going to help them.
 - Conflict of Interest Concerns
 - Funding support to collaborators who ended up on regulatory boards, thus weakening the regulatory oversight since those people were getting paid by Wang.
 - Unclear sources of funding for Wang in addition to heavy government funding. He felt compelled to produce a big result.
- Research misconduct is somewhat common.
 - Withholding results that oppose PI's interests.
- Contributing conditions in the case of research misconduct
 - The structure of having mentor/apprenticeship in research. You're put into a very weak and vulnerable position due to this dependence in academia.
 - Impossible to know whether things are done voluntarily.
 - Funding practices and widespread conflict of interest
 - Approach to research changes based on pressure from funding sources. Choose how to approach the study dependent on interests on those who give cash to do research. Thus, science is affected by private considerations.
 - Intense pressure to publish (more papers = get ahead) and to be the first one
 - Try to anticipate data and publish anyway
 - Social and Media Recognition
 - Lack of ethical oversight from boards
- Proposed Solutions
 - Ethics education
 - Increased expert oversight and public awareness.
 - Better guidelines for egg/organ donation
 - Revisit publication practice to do anonymous research, have journals with ethical review, revise co-authorship?

12/11 - Review Session

- Arguments against Daniel would be utilitarian ones.
- Libertarianism says that all people born have natural rights that can't be taken away. These are the rights that you would have if we didn't really have any form of government or state. The thing that justifies government is your consent to give up some of those natural rights, give them to the state, and in return live with the consequences.
 - We shouldn't forfeit our rights if we don't have any given back to us.
 - Unless you explicitly consent, you can't lose these rights.
- Daniels gives an egalitarian argument for universal healthcare.

Final Prep

Essay Prep (Selective Abortion on Genetics)

- Background: Peter Singer, in his article “All Animals are Equal”, argues that animals’ use in scientific experimentation is unethical in most cases, except those where experimentation will be justified if the human benefit is great..
- Thesis: In this essay, I will argue that Singer’s argument is a stance I agree with because animals are sentient creatures with moral status, usage in scientific experimentation is an unethical speciesist practice and we should hold an equal consideration of animals’ interests.
 - Reason #1: Animals are sentient creatures with moral status
 - Nonhuman animals have moral status since they have ability to feel pain/pleasure and they are sentient creatures. We should hold equal consideration of their interests.
 - Singer says that something has moral status if it has the capacity for suffering and pleasure, (rejecting the sliding scale of moral status), and so if a being suffers, there is no justification for not taking that into consideration.
 - Counter: One of the ways to counter Singer is to say that animals don’t have moral status, and that moral status is only for humans.
 - Human Norms View: Humans may not exhibit all these traits at all points in their life (some when they are a baby, but not all). However, they still should have moral status because it is a member of the group (humans) and the norm of the group is something we find meaningful.
 - Reason #2: Usage in scientific experimentation is an unethical speciesist practice
 - We ignoring or differentially weighting the similar interests of individuals from different groups
 - Currently, we prioritize minor interests of ours over the major interests of the animals.
 - If you have equal consideration, then most speciesist practices wouldn’t be allowed.
 - Reason #3: Equality of consideration of their interests
 - Singer:
 - Nonhuman animals have moral status since they have ability to feel pain/pleasure and they are sentient creatures. We should hold equal consideration of their interests.
 - Sentient creatures
 - Counter: Some people may say that if we have to treat animals equally, then we have to give them the right to vote. However, there is a distinction between equal and same. One doesn’t have to assign a right to abortion to men in order to assign it to women. Just because two things are equal

doesn't mean we treat them to exact same. It requires equal moral consideration of their interests