

## WHAT IS ETHICS? WHY SHOULD I STUDY IT?

*I SOLEMNLY PLEDGE to dedicate my life to the service of humanity; THE HEALTH AND WELL-BEING OF MY PATIENT will be my first consideration; I WILL RESPECT the autonomy and dignity of my patient; I WILL MAINTAIN the utmost respect for human life; I WILL NOT PERMIT considerations of age, disease or disability, creed, ethnic origin, gender, nationality, political affiliation, race, sexual orientation, social standing or any other factor to intervene between my duty and my patient; I WILL RESPECT the secrets that are confided in me, even after the patient has died; I WILL PRACTISE my profession with conscience and dignity and in accordance with good medical practice; I WILL FOSTER the honour and noble traditions of the medical profession; I WILL GIVE to my teachers, colleagues, and students the respect and gratitude that is their due; I WILL SHARE my medical knowledge for the benefit of the patient and the advancement of healthcare; I WILL ATTEND TO my own health, well-being, and abilities in order to provide care of the highest standard; I WILL NOT USE my medical knowledge to violate human rights and civil liberties, even under threat; I MAKE THESE PROMISES solemnly, freely, and upon my honour.* (World Medical Association, “Physician’s Pledge”, 2017 version).

Welcome to the study of bioethics! In this first lecture, we’ll be covering some of the basics of the field, including a number of important definitions. These lecture notes are intended to accompany Beauchamp and Childress’s *Principles of Biomedical Ethics*<sup>1</sup> (B-C from here on out) and you should make sure to read the relevant chapters in their entirety along with these notes. By the end of this lesson, you should be able to: (1) define *ethics* and *moral norms*, (2) distinguish between *normative* and *nonnormative ethics*, (3) describe the *common morality*, and (4) discuss the relationship between moral norms and laws/policies. **Ethics** involves the study of morality and moral norms, and the institutions that encode these norms (such as laws, religious practices, etc.). In general, moral norms are concerned with how we treat others. The study of ethics can be broken down into two general categories: **normative ethics** and **nonnormative ethics**. Normative ethics concerns itself with which norms of conduct we ought to adopt, and which moral norms are the correct ones to have (in many cases, we don’t actually live up to these). Normative ethics can be further broken down into the study of both **theoretical ethics** and **practical (or applied) ethics**. Theoretical ethics attempts to provide a general account of the sort of principles/rules that apply to ALL actions, while practical/applied ethics is devoted to the study of the moral principles relevant to particular sorts of situations (e.g., “biomedical ethics”, “business ethics”, and so on.)<sup>2</sup>.

In contrast to normative ethics, nonnormative ethics studies moral practices without making any sort of evaluative judgements, but simply aims to describe the way certain norms/rules happen to work. It includes **descriptive ethics** (of the sort done by historians, sociologists, psychologists, and political scientists) which involves studying the moral norms actually used by a certain group of people. and **metaethics**, which involves studying the language, methods, and concepts that are used in studying normative ethics. Here is a table with some sample questions/problems from each area:

NORMATIVE ETHICS		NONNORMATIVE ETHICS	
Theoretical Ethics	Applied/Practical Ethics	Descriptive Ethics	Metaethics
Do all people have a fundamental “right to life”? If so, what does this mean?	When, if at all, is abortion morally acceptable?	How do Republicans and Democrats feel about ethical issues such as abortion and poverty?	What do moral terms really “mean”? (For example, some religious people think “Murder is morally wrong” means something like “Murder is against God’s will.” Other people disagree with this.)
What does it mean to be a <i>person</i> worthy of moral consideration? Is it possible for there to be non-human persons, or for there to be biological humans who are not persons?	Is it permissible to use non-human animals (such as rats or pigs) in medical experiments?	Do Western cultures and East Asian cultures have the same attitudes towards animal rights?	How is it possible for us to learn about morality in the first place?
What sorts of <i>virtues</i> distinguish a morally good person from a morally vicious one?	When, if ever, is it morally OK to cheat on an exam?	To what extent, if any, do men and women have different values?	What sort of evidence is appropriate to defend or justify one’s moral beliefs?

In this class, we’ll focus primarily on (normative) questions of applied/practical ethics, though we will at points be engaging with all four different areas of ethics inquiry.

## WHAT IS THE COMMON MORALITY? HOW DOES IT RELATE TO PARTICULAR MORALITIES?

Different cultures, religions, and social or political groups often endorse somewhat different moral norms. Among other things, they disagree about things such as sexual conduct, the amount one should give to charity, the moral status of animals, and so on. However, there are also a number of aspects that nearly all of the moralities agree on. According to B-C, these areas of agreement form a **common morality** that is the “set of universal norms shared by all persons committed to morality” (3). That is, *every* person who cares about morality agrees that these rules should be followed. Some of these rules include things like the following:

1. Absent a very compelling reason (such as self-defense), you should never intentionally kill an innocent person.
2. It is wrong to inflict pain or suffering on people merely to benefit yourself.

<sup>1</sup> Tom Beauchamp and James Childress, *Principles of Biomedical Ethics*, 8th ed. (New York: Oxford University Press, 2019).

<sup>2</sup> Two good, free introductions to the basic ideas of normative ethics are James Fiester, “Ethics,” in *Internet Encyclopedia of Philosophy*, May 2019, <https://www.iep.utm.edu/ethics/>; Peter Singer, “Ethics,” in *Encyclopedia Britannica*, March 2019, <https://www.britannica.com/topic/ethics-philosophy>.

3. In general, you should not lie, and should try to fulfill your promises to others. You should not steal or cheat.
4. You should take care of those who cannot defend themselves, such as children. You should rescue others from danger, especially if you can do so with little danger to yourself.

Note that just because common morality is “universal” in the sense that it applies to different cultures, times, and places, this does NOT mean that every *person* will necessarily follow the common morality (after all, some people aren’t very moral!). It’s simply that IF you are the kind of person who cares about behaving morally, THEN you need to (at least) adopt these norms.

The common morality also identifies certain **character traits** (or **virtues**) as commendable. These include things like bravery, kindness, honesty, and generosity. In addition to the common morality (which is shared by all moral people), there are also **particular moralities**. According to B-C, these moralities “present concrete, non-universal, and concrete-rich norms” (6) that specify and extend the more general rules provided by the common morality. Some examples of particular moralities include the following:

- The **professional moralities** adopted by groups such as medical staff, lawyers, engineers, business people, athletes, or teachers. Here, a “profession” means something more than just a “job.” Instead, professions usually require specialized knowledge, have barriers to entry (i.e., you must pass certain standards in order to work in a profession), and are often self-regulated by specialized organizations (such as the American Medical Association, American Bar Association, etc.). The **Hippocratic Oath** taken by physicians describes (some of) the rules of one particular, professionals morality.
- The religious moralities adopted by groups such as Christians, Muslims, Buddhists, and so on, also count as particular moralities (though not professional ones).

While adopting a particular morality may require that you do *more* than the common morality requires (it might require that you treat certain **moral ideals** as **moral obligations**), it should never require that you *break* the rules of the common morality. So, for example, while it might be OK to adopt a particular morality that requires you to “give half your money to charity” (since this is *strengthening* what the common morality requires) it would NOT be morally permissible to adopt a rule that said that it was OK for you to set cats on fire for fun, or to eat human children for lunch (since these are actions that are prohibited by the common morality).

## WHAT IS THE RELATIONSHIP BETWEEN PUBLIC POLICY AND MORALITY?

Decisions about **public policy** (including decisions about laws, regulations, and government funding decisions, enforcement, etc.) often involve questions of common and particular morality. However, these decisions also involve many other factors (such as the costs of implementing/enforcing the law, the extent to which the law *could* be enforced, the acceptability of the law to both the voting public and powerful interest groups, the potential for abuse, and many other things):

- When, if ever, should abortion be legally permissible? Who can administer abortions? What age does a woman need to be to seek an abortion? [One relevant moral question: “Does a fetus have a right to life?”]
- How should health care be financed? Should the government provide a “baseline” of care to everyone? What role should private insurance play? [One relevant moral question: “Do people have a fundamental moral right to health care?”]

*As these examples illustrate, morality does not determine the precise nature of public policy. Among other things, lawmakers need to consider things like the possible side-effects and costs of a law.* This is why, for example, some people who think abortion is always immoral might nevertheless think that it should be legal (e.g., perhaps they think that passing a law against abortion might simply cause women to get unsafe abortions). It can also explain why people who think that abortion is sometimes moral might nevertheless think that it should nevertheless be illegal (e.g., perhaps they think having a law allowing it will lead to too many abuses).

## QUESTIONS FOR REVIEW

1. Give two examples (each) of questions of normative ethics and questions of nonnormative ethics.
2. The “Physician’s Pledge” (see top of handout) is one modern version of the ancient “Hippocratic Oath.” It was first introduced in 1948, partially in response to unethical actions by Nazi doctors/scientists. Is there anything that you would add/remove? Why?
3. Consider the following thought experiments. For each case, (1) describe what you think the right/ethical thing to do is, and (2) say *why* you think this. Make sure that your explanation for one case doesn’t contradict your answer to another case.
  - a. **Running out of drugs.** You are an emergency room physician trying to deal with an outbreak of a rare and deadly disease. The disease can be treated, but you are running low on drugs. Four patients have just come in. The first has a drug-resistant form of the disease, but his life could be saved if you gave him *all* of your remaining drugs. Alternatively, you could use these same drugs to save three other patients (who have the “normal” form of the disease). How should you distribute these drugs? (If you say “exactly equally” all four will die.)
  - b. **Organ transplant.** You are an emergency room physician trying to deal with a serious accident that injured many people. You have three patients who you know will die without immediate transplant organs (one needs a heart, one a liver, and another two working lungs). Just by chance, you *also* know that there is a patient who has just been admitted with very minor injuries, and whose organs would be a perfect match for these three people. You realize that you could easily “accidentally” kill this patient and use her organs to save the other three people. What should you do?

- c. **Organ Transplant 2.** The same as above, with one key difference. In this case, you don't actually need to kill the potential donor. Instead, you could simply let them die from some easily preventable cause (by delaying treatment long enough). Then, you could use their organs to save the three others.