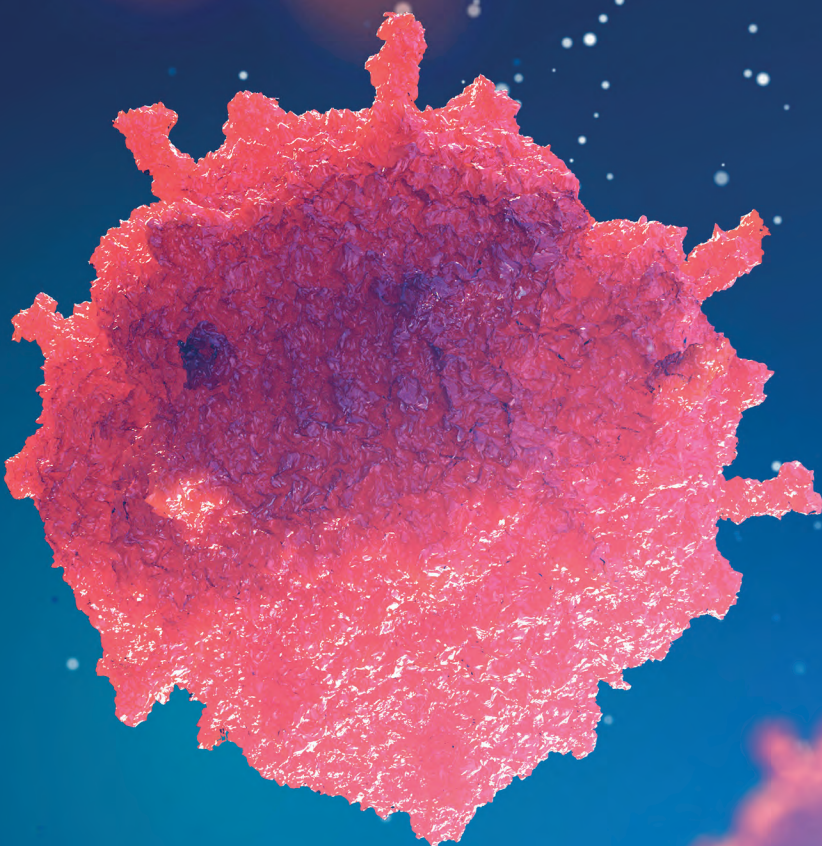


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Zea Miller

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Center for Cognition and Neuroethics
University of Michigan-Flint
Philosophy Department
544 French Hall
303 East Kearsley Street
Flint, MI 48502-1950

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The Mind of Personal Identity: A Criticism of the Psychological Criterion

Kathleen Berta

University of Michigan-Flint

ABSTRACT

Many arguments that forward the psychological criterion of personal identity seem to rely on the presence of external criteria, especially external sources that can inform the individual of his or her state. Whether or not the psychological criterion is preferable when judging what defines personal identity is not something this essay will address. This essay will focus on clarifying the type of evidence that should be used when supporting the psychological criterion. Evidence for the psychological criterion of personal identity should be based on internal criteria. To be specific, something should exist within every individual that defines their identity without any reliance on external sources of knowledge. This essay will mainly support this argument using amnesia as an example. An amnesiac may be able to retain the identity held in their pre-amnesiac state, but any evidence of their identity that relies on knowledge obtained externally should not count under the psychological criterion. Scenarios in which there is a complete lack of consciousness will also be gone over.

KEYWORDS

Personal Identity, Psychological Criterion, Amnesia, External and Internal Criteria, Mind

INTRODUCTION TO THE PSYCHOLOGICAL CRITERION

With personal identity in question, some philosophers would argue that an individual's own consciousness or psychological awareness makes up their being. It follows that one's own personal identity would change along with changes in their psychological state, especially in cases where the very personality, mindset, or memories of an individual appear to drastically change.¹ These beliefs make up the psychological criterion of personal identity. This essay will argue that a changed psychological state is not sufficient to change somebody's personal identity, an assertion which will be applied to the case of amnesia. A pre-amnesiac person still shares the same identity with their amnesiac self. Though their psychological state, including their memories, have changed, they have not literally become a different person. This essay will not try to explain what exactly constitutes personal identity or *what* exactly should be retained in order for one's personal identity to remain intact, but will argue against the psychological criterion of personal identity as it is defined now. People who forward the psychological criterion and insist that personal identity changes with psychological changes are incorrect. At the least, the psychological criterion of personal identity does not adequately explain the limits of personal identity.

On what exactly constitutes personal identity, numerous philosophers such as Locke (1694) have argued that such a thing should be based on a psychological criterion. An individual should be identified by what their current psychological state is, so a change in one's psychological state would lead to a change in their personal identity. This holds true even if such a change is brought on by something along the lines of an illness such as amnesia. So if somebody—for the sake of simplicity, let's call him George—suffers from retrograde amnesia, meaning he has no memories of events that occurred before the onset of the condition, then he might as well count as an entirely new individual under the psychological criterion. People familiar with George may have their own memories of the pre-amnesiac George, but George would no longer be that remembered person under the psychological criterion. However, is it really possible for an entirely new personal identity, or an entirely new person, to be created simply by altering somebody's psychological state?

1. This essay will not attempt to argue for the physical criterion, which asserts that personal identity is defined by a continuous physical thing, namely, the physical brain. It will only argue that the psychological criterion does not adequately explain personal identity.

Some may argue that the personal identity of George is equivalent to their general psychological state, in which case an amnesiac George truly would be an entirely different person. Such an individual would no longer possess the same personal identity if they were to suffer amnesia. Derek Parfit, for example, notes this in his *Reasons and Persons*. If somebody were to flip a switch that wiped George's memories and then gave him a complete set of memories entirely consistent with the ones Napoleon had, then George would no longer be George (Parfit 1984, Section 84). If anything, George would be more like Napoleon. This essay would argue that George is still George, whether with his own memories intact or with memories identical to Napoleon's. While George would most likely act differently than he typically would in his pre-Napoleon-minded state, George would still be George, but with a different set of memories. The amnesia-afflicted individual does *not* possess a different personal identity than the original individual who did not have amnesia.

THE STATE OF GEORGE

If the pre-amnesiac George were to somehow know that he would suffer from amnesia on a later date, George would empathize with his amnesia-ridden future self. Pre-amnesiac George may feel some amount of fear, knowing that he will develop amnesia. As pointed out by Bernard Williams, a person who knows that their memories will be removed immediately before they are tortured will still feel trepidation at the thought of being tortured (Williams 1973, 167). The tortured person will have no memory of the torture taking place, but the pre-torture person still fears for what will be their tortured self. The pre-amnesiac's connection to the actual amnesiac may seem clear in this example, considering the pre-amnesiac is psychologically connected to the amnesiac—the pre-amnesiac knows that they will suffer from amnesia. The true difficulty lies in explaining how the amnesiac individual, somebody with absolutely no internal psychological connection to the pre-amnesiac individual, could possibly empathize with that pre-amnesiac individual. After all, if we are to argue that the pre-amnesiac and amnesiac are identical, then they should both possess a similar feeling of connection to each other.

As George progresses to having amnesia, some may argue that he is losing his psychological continuity. Ultimately, his past and future selves are incompatible because they have no knowledge of each other. However, it has already been

explained how the pre-amnesiac can empathize with the future amnesiac. For this to happen as told by Williams, however, the pre-amnesiac *must* be fully aware that they will develop amnesia. A pre-amnesiac who is entirely ignorant of what will happen is not much different than the amnesiac in terms of how much they can empathize with their current and other selves. Pre-amnesiac George would have absolutely no internal psychological connection to the amnesiac George. The pre-amnesiac and amnesiac share no similar memories and both must be told of each other for there to be any semblance of recognition between them. Therefore, if the pre-amnesiac is never told that they will suffer from amnesia, then they will have no internal psychological connection to the amnesiac. Likewise, if the amnesiac is never told that they suffered from amnesia, then they will have no internal psychological connection to the pre-amnesiac. This is not the case once both the pre-amnesiac and amnesiac are made aware of each other, but it seems as though they both must be made aware of each other. It seems ridiculous that the pre-amnesiac and amnesiac are identical in one scenario, but not identical in the other. Under the rules of personal identity, something that explains a continuous being, it cannot be possible for two individuals to be identical in some cases and not identical in others, a point brought up by Locke in his *Of Identity and Diversity* (1694). So one of the following must be true in regards to all versions of George: a) the pre-amnesiac George and amnesiac George are identical in all cases or b) the pre-amnesiac George and amnesiac George are *not* identical in all cases.

INTERNAL AND EXTERNAL CRITERIA OF PERSONAL IDENTITY

The scenario in which some may argue that the pre-amnesiac and the amnesiac are not the same person would be if they were completely ignorant of each other. Realistically, this possibility seems remarkably small when considering that George merely has to come across the knowledge of his condition, which will automatically generate a psychological connection between the pre-amnesiac and amnesiac George. This would count as *external criteria of personal identity*—George's identity has supposedly been retained because of external means. As mentioned before, however, this may never happen and the pre-amnesiac and amnesiac George may remain ignorant of each other and possess no psychological connection. This is what the current definition of the psychological criterion does not address. What determines personal identity should not rely on external criteria for this very reason. The pre-amnesiac George and amnesiac

George either are or are not identical. If we relied solely on external sources of knowledge for determining the identity of George (for example, if we were to rely on whether a doctor informs George of his condition), then the true identity of the man George would be capable of changing. Therefore, if the psychological criterion of personal identity is true, then there must be something constant within George himself. This something makes up the *internal criteria of personal identity*. As stated in the introduction, this essay will not attempt to argue what that constant thing is, but rather explain how amnesia or a lack of psychological continuity does not imply that a pre-amnesiac and amnesiac are different people.

PERSONAL IDENTITY AND THE EMPTY SHELL

The recently amnesia-afflicted individual is still the same person as their pre-amnesiac self, but is in a different state of mind or has a different “addition.” George is still consistent with their pre-amnesiac self in that they have the same continuous brain, most likely the same relations they had to other people, and still exist in a world that was shaped by their pre-amnesiac self. Let’s say that George worked as engineer at a particular company before he suffered amnesia and was eventually promoted to being a manger over the years. George would still have some connection to that company and everything he accomplished at it even if he didn’t remember any of it. For example, even if George loses memory of the company itself, he may still possess skills he used while employed at that company. George may have the potential to quickly learn advanced calculus, drafting, or possess outstanding leadership skills, for instance. Even if he is manipulated by somebody into believing that he is a high school dropout who works at a local fast food joint, there are bound to be some things that are carried over from his job as an engineer. At least some aspects of the man known as George remain consistent over time and are not entirely dependent on external, non-personal criteria.²

This essay’s argument for strictly internal criteria for the psychological criterion of personal identity is based around the idea that something will remain consistent over time, even through radical personality changes or memory losses. What this essay will call the *Empty Shell Argument* is worth bringing up here. Relating this

2. Parfit has a Reductionist view of personal identity, holding that personal identity remains consistent if certain facts about a person hold true over time and that these facts are largely impersonal.

back to Williams's example, we could imagine that George is about to undergo a process that will, in part, completely erase his memories. However, unlike in Williams's example, George will *not* be given new memories in this scenario. In addition, this process will not only completely erase his concrete memories, but also eliminate his ability to function consciously (meaning, he will not be able to form propositional thoughts, he will lose his ability to speak, he will lose the ability to perform basic and complex tasks, he will lose any potential he had to perform those basic and complex tasks, and so on). If George were to end up in such a state under the Empty Shell Argument, would he still possess his personal identity or would it be gone? After all, the Empty Shell George would not only lack psychological connection to his former self, but would also appear to lack a psychological state.

Perhaps the most relevant thing to wonder at this point would be whether the man George still exists. George as an empty shell lacks the ability to function even on a basic level. While it's been stated before that this essay will not attempt to prove *what* exactly must be retained in order for personal identity to remain consistent, this essay will be bold enough to argue that such a thing should be a conscious thing. After all, if George was not at all conscious, he essentially would not be much different from a robot. In the case of the Empty Shell Argument, George would lack a personal identity.

FINAL WORDS

To relate George's amnesiac case back to a philosopher discussed earlier, Bernard Williams largely disagrees with Parfit's take on personal identity, insisting that psychological continuity is not at all required for somebody's personal identity to remain consistent. For all intents and purposes, this essay sympathizes with Williams's dismissal of the psychological criterion, but not with his reasons why. The second case presented in Williams's *The Self and the Future* is worth noting here, with it providing a fictional example about somebody whose memories (or at least part of their memories) will be destroyed. The person, dubbed Person A, in Williams's example is told that they will be tortured sometime in the future. However, they are also told that their memories will be altered in the following ways: Person A's memory of learning that they will be tortured will be destroyed before it happens, *all* of the memories Person A has at that point will be destroyed before they are tortured, Person A will be given an entirely

different set of memories, and this entirely different set of memories will be identical the memories held by somebody else, Person B, who is never going to be tortured. Ideally, Person A would not care that they are about to be tortured under personal identity's psychological criterion, because they have been given information that their memories will be altered to the point where they won't remember being tortured. However, Williams points out the obvious: Person A *would* care, indicating that they aren't as connected to their psychological states as some people may insist.³ However, Person A caring depends entirely on them being told about what's going to happen. This furthers the point above about George. While George may lose their memories, the pre-amnesiac George would still be able to empathize with their amnesiac self, provided that they are properly informed by an external source. Based on this external condition, the same would also apply to the amnesiac George's awareness of the pre-amnesiac George.

The limitations on Williams's view have already been gone over. Parfit's Reductionist view holds that personal identity simply consists of various facts about an individual's own continuity. Parfit himself, while acknowledging that this is opposed to what many before him thought, believes that his view is an improvement over past views on personal identity. While more inclusive than past views, the Reductionist view still falls short when explaining how various mental states are connected by strictly internal causes. Even Parfit's explanations of drastically changed psychological and physical states rely on the individual obtaining knowledge of their condition from some external source. This reliance on something external to one's own being is still remarkably flimsy and a poor way to judge the continuity of personal identity. As explained before, relying on external sources of knowledge makes personal identity become too circumstantial.

3. For the sake of space, Parfit's response to Williams will not be gone over in much detail in this essay. Parfit points out how Person A has a specific connection to their supposed consistent psychological identity—Person A cares that they will be tortured. This level of connection puts their psychological connection on a spectrum. For example, exactly how many aspects of the psychological criterion are required to connect two beings in two different states? The same can be applied to the physical criterion. For example, in Parfit's *Physical Spectrum*, at what point would somebody become a different person if we were to replace bit by bit of their physical brain? What if only 1% of their brain were replaced, followed by 2%, 3%, 4%, and so on? They would still possess the same personal identity on this spectrum if we were to apply the same criteria Williams uses. Parfit ultimately argues that neither a physical or psychological criterion are truly necessary for the continuity of one's personal identity.

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If the psychological criterion is to hold any water in this debate, then it should be bound to explaining the continuity of personal identity without external bases.

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Prima Facie Consequentialism: Reconciling Consequentialism and Deontology into a Normative Ethical Theory

Logan B. Cross

Michigan State University

BIOGRAPHY

Logan Bradley Cross studies philosophy and psychology at Michigan State University where he serves as a lab instructor for an undergraduate course in ancient Greek philosophy and a philosophy tutor. His primary areas of studies include ethics, political philosophy, sociology, aesthetics, Eastern philosophy, and critical theory. He was born in Muskegon, Michigan.

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ABSTRACT

Deontological ethics is defined as a normative ethical theory that is based primarily around rights, duties, and/or obligations that *always* take precedence in moral judgements even if following said duties would not lead to the best consequences. For example, many deontological philosophers view abstaining from murder as a deontological duty; to such thinkers, it is *always* wrong to commit murder, no matter the consequences. The rationality of deontological ethics has been hotly debated and has a propensity for dividing opinions. In the first section of this essay, I will argue that deontological ethical theories are irrational because they are products of innate, automatic cognitive heuristics loosely tied to human emotion as opposed to genuine moral reasoning; in the second section, I will try to reconcile deontological judgements into a working normative ethical theory by suggesting that they have value as *prima facie* duties—or duties to be observed under all circumstances except where carrying out said duty would have foreseeable negative consequences for the collective whole, or another *prima facie* duty that is contradictory to another is in that instant more important; in the third section, I will aim to distinguish *prima facie* consequentialism from traditional utilitarianism, using examples to show how the two doctrines differ in addition to how *prima facie* consequentialism is capable of avoiding the criticisms typically associate with traditional utilitarianism.

KEYWORDS

Prima Facie Consequentialism, Ethics, Ethical Theory, Consequentialism, Deontology, Morality, Utilitarianism, Cognitive Heuristics, Moral Cognition, Normative Ethical Theory

PART I: MORAL AUTOMATION—A CRITIQUE OF DEONTOLOGICAL ETHICAL JUDGEMENTS

The theory that deontological theories are grounded in emotion rather than reason was discussed in detail by philosopher Joshua Greene in his essay *The Secret Joke of Kant's Soul*. Greene makes use of two famous ethical dilemmas; namely, the *trolley dilemma* and the *footbridge dilemma*. The trolley dilemma goes as follows; a runaway train is poised to hit and kill five people, unless you throw a switch that will divert the train onto a separate set of tracks where one other person is standing, thus killing the one individual instead five. The footbridge dilemma is of a similar nature— as with the trolley dilemma, a runaway train is poised to hit five people standing down the tracks. However, in the footbridge dilemma, rather than throwing a switch to divert the train, you can push a heavy person down from an overlooking footbridge onto the tracks to stop the train. Surveys and other testing has shown that people tend to be more willing to throw the switch in the trolley dilemma than to push the person onto the tracks in the footbridge dilemma even though both situations have the same cost/reward balance—killing one person to save five others (Greene 2015, 42). Kantians¹ will likely attribute this fact to the *doctrine of double effect*²; however, Greene dismisses this notion by pointing out that the people tend to react similarly to the trolley case in the *looped trolley dilemma*, in which the runaway trolley is poised to hit five people unless you throw the switch towards an alternate *looped* track with one person poised to be hit that would stop the train; however, in this case the train would have looped back around and hit the five had the one person not been hit. Greene points to the fact that in both the footbridge and lopped trolley case a person is directly used as a means, saying “[t]he consensus here [in the looped trolley dilemma] is that it is morally acceptable to turn the trolley in this case, despite the fact that here, as in the *footbridge* case, a person will be used as a means” (Greene 2015, 42). As such, Greene proposes a different theory to account for the difference—human emotion; Greene feels that the only reason people sacrifice the one person in the trolley dilemma and not in the footbridge dilemma is because the act of physically

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1. Philosopher Immanuel Kant was the most accomplished proponent of deontology as a normative ethical system.
 2. The doctrine of double effect states that is morally permissible to cause something negative to happen as a side effect of causing a good so long as it was unintended. This implies that it is wrong to use a person directly as a means to prevent a negative occurrence.

pushing a person to stop a train is more emotionally traumatizing than merely throwing a switch. As evidence, Greene references previous scientific studies that show that the parts of the brain associated with emotion, rather than cognitive reasoning, are activated when people make deontological judgements.

A deontologist, of course, will be unconvinced by Greene's theory. They will stand by Kant, who proposed deontological judgements as a normative ethical system, saying "[an] action's moral value doesn't depend on whether what is aimed at in it is actually achieved, but solely on the principle of *the will* from which the action is done, irrespective of anything the faculty of *desire* may be aiming at" (Kant [1785] 2008, 10). So, Kant feels as though acts such as throwing the switch are wrong simply because it is always wrong (that is, it is a deontological duty not) to kill somebody.

In his essay *Morally Irrelevant Factors: What's Left of the Dual Process-Model of Moral Cognition?* Philosopher and deontological thinker Hanno Sauer discusses several logical and method flaws in Greene's theory. One flaw concerns the induction power of Greene's form of inference from which he draws his conclusion, which Sauer identifies as *reverse inference* (Sauer 2012, 789). The form of a reverse inference is as follows: (1) Whenever cognitive task T is performed, brain area A is active. (2) Other studies have shown that whenever cognitive task T is performed, brain area A is active. (3) T is a kind of K. (4) Activation of A while performing T demonstrates that T is of kind K. This form of inference differs from the form predominantly used in cognitive neuroscience, the *forward inference*³. According to Sauer, the reverse inference is not immediately clear or convincing like a forward inference is. He notes that the strength of the reverse inference is directly correlated with the selectivity of activities the activated brain region seems to be involved in, saying "[t]he strength of a reverse inference varies as a function of the selectivity with which the region is involved in the process" (Sauer 2012, 789). In other words, if the brain areas Greene cited in his studies were for the most part only observed in dealing with emotional tasks, Greene's theory might be cogent. However, Sauer suggests that the brain areas Greene based his studies on do not appear to have this selective quality, as the brain regions Greene cites seem to play vital roles beyond emotion. Sauer even suggests that the primary functions of these brain areas do not appear to be related to emotion, saying "[t]

3. (1) Whenever cognitive task T is performed, brain area A is active. (2) Therefore, brain area A is involved in the execution of T.

he primary function of the dlPFC [a brain area cited by Greene] seems to lie in working memory (Wager & Smith 2003): an increased activation in that area does not directly bear on whether a mental function is more cognitive, in the sense of rationality, but on whether it manipulates a greater amount of information" (Sauer 2012, 790).

In defense of Greene's theory, Sauer's evidence that the primary functions of the brain areas Greene cited in his work does not prove that said brain areas are not still related in some way to emotions present in deontological judgements or emotions in general—it is not necessarily unlikely, as brain areas have been known to have multiple/complex functions. Furthermore, Sauer's objections to Greene's physical evidence does not show deductively that emotions do not play a role in deontological judgements in general, nor does it give any insight to the question of whether emotions are truly a morally irrelevant factor. It seems safe to infer from the very natures of emotion and cognitive reason that, so long as one has ample time to reason, one should exercise reason in all ethical judgements. That is, emotion is often associated with deluded and rash decisions⁴, whereas reason and thoughtful reflection have always been associated with wisdom. Considering this, it seems cogent to say that cognitive reflection should always take precedence over emotionality in ethical judgements. This, of course, suggests Greene is right to think that emotions are morally irrelevant factors in ethical judgements.

Sauer remains unconvinced. He believes that the link Greene draws between matters of automatic versus controlled mental processes, emotional versus cognitive processes, and justified versus unjustified processes of treating ethical issues suffers from *conflation*⁵ (Sauer 2012, 800-801). To Sauer, emotionality and automatic (as opposed to cognitive/reasoned) brain processes need not be merged together, saying "[a]utomatic processes need not be emotional at all: non-emotional, but nevertheless quick and effortless intuitions in logic, language or physics are apt counterexamples to this assumption" (Sauer 2012, 801). Sauer goes on to suggest that the automatic responses involved in deontological judgements might be sort of moral *heuristics* that can be vital to our functioning.

4. In other words, emotionality seems to be tied to decisions the brain makes *automatically*—more on this later.

5. Conflation means to merge two or more idea/belief sets into one—in this case, Sauer implies that Greene's conflation of emotionality, automatic cognition and deontological judgements is unwarranted.

Heuristics are general rules/procedures followed to solve a specific problem. In the case of cognition and neuroscience, heuristics often refer to automatic cognitive responses to certain stimuli; fears and biases that are registered automatically in people more or less without their conscious control are examples of these. Greene, like many neuroscientists and evolutionary psychologists, even suggests that such heuristics might have an evolutionary origin; more on this to follow (Sauer 2012, 795).

Greene's view of moral heuristics represents a relatively modern evolutionary psychology view of the brain and its functions. Followers of evolutionary psychology believe that the automatic processes of the brain (the so-called cognitive heuristics Sauer discusses) are evolutionary relics of the mind. For example, consider that many people have a strong fear of heights that arises in them automatically—an evolutionary psychologist would account for this by saying that our brains evolved an automatic response towards heights via natural selection because among our distant ancestors those who did not fear heights were more likely to fall and die from heights and thus not live on to reproduce relative to those who feared heights. Greene feels that these automatic deontological responses present in humans may be of a similar evolutionary nature—sort of moral heuristics that have been passed down through evolution because they were beneficial to the survival of our ancestors; it is likely that they evolved so that people would react in time to situations that required *urgent* ethical decision making—for example, one might not have time to think through options if one wishes to save a person from drowning, as the individual might drown before one has time to amply reason and weight the risks, etc.; the situation needs a quick, automatic decision. Here we find the strength of these so-called deontological judgements that appear as evolutionary relics; they create automatic responses to these urgent situations. As such, Sauer can suggest that the automatic deontological judgements that Greene dismisses as emotional and unreasoned may, on the contrary, be of significant, evolutionarily-proved, time-tested value.

Returning to the defense of Greene, I suggest that the jump from a deontological judgement being an evolved automatic cognitive response to deontological judgements truly having moral value is guilty of committing the *naturalistic fallacy*⁶. To illustrate this view, I cite modern evolutionary psychological

6. The naturalistic fallacy is an informal fallacy that is committed by trying to infer that something is good/we ought to do something from what is natural/the way something is.

findings regarding discrimination. Evolutionary psychology has shown empirically that many people have an *implicit bias*⁷ against people of different race/ethnicity than their own, often leading to racist and/or discriminatory behaviors. Evolutionary psychologists believe this automatic response is an evolved automatic response that came about because it was beneficial for the early ancestors to distinguish between coalitional boundaries for personal safety (which often meant identifying cues associated with physical similarities). While these discriminatory behaviors are a natural, automatic response much like Sauer's view of automatic responses associated with deontological judgements, very few people would advocate the notion that racist, xenophobic, or discriminatory behavior is morally justified. In fact, many people explicitly reject such behaviors. From this, the presence of the naturalistic fallacy seems clear—from the same principle that says that you cannot derive the notion that we ought to act with discrimination because we have an automatic and natural tendency to do so, one cannot deductively say that we ought to claim automatic deontological responses are morally valuable simply because we have a natural tendency to make such responses. The Stanford Encyclopedia of Philosophy summarizes the naturalistic fallacy by saying “[t]he intuitive idea [of the naturalistic fallacy] is that evaluative conclusions require at least one evaluative premise—purely factual premises about the naturalistic features of things do not entail or even support evaluative conclusions” (Ridge 2017). Sauer's argument lacks this evaluative premise—while he does give good support to the notion that deontological judgements stem from cognitive heuristics, he fails to provide any evaluative support that such heuristics are morally beneficial. While it is true that Sauer only suggests that deontological emotions only *usually* respond to morally relevant features of situations, Sauer cannot hope to create a normative ethical system that will *always* respond to morally relevant factors based around said cognitive heuristics due to this naturalistic fallacy. At best, deontological judgements represent *prima facie* duties⁸, as described by Ross (Ross 1930, 21).

In conclusion, I attest that while Sauer's views have a certain degree in power in discounting the physical evidence that Greene cites, it does not show deductively that deontological judgements are emotion-free altogether, nor does it provide

7. Implicit biases are subdued judgements or behaviors that result from sub-conscious cognitive processes.

8. That is, conditional duties that are to be followed in most circumstances, but that can be overridden if the situation requires it.

insight into the matter of whether emotionality and the automatic cognitive heuristics truly are morally irrelevant factors. As such, I conclude that deontological judgements are at best evolutionary cognitive heuristics that evolved so humans could quickly make moral judgements in situations where time pressures do not allow for further reasoned ethical consideration. While such deontological judgements may *usually* be reliable, it seems apparent from both a normative and empirical standpoint that they are not *always* reliable. Considering this, it seems cogent to say that Greene's theory of the moral irrelevance of deontological judgements is correct, and that we should always, so long as we have ample time to do so, attempt to reason through moral judgements in the cognitive, non-emotional way that Greene finds more so characteristic of consequentialist as opposed to deontological judgements.

PART II: THE CONSEQUENTIALIST SOLUTION

We have seen in part one that Consequentialism can be defined as a normative ethical theory that states that an act is morally right if it produces the best overall consequences, regardless of the actions taken to achieve the best consequences. By definition, it follows that consequentialism allows one to occasionally do negative acts as an unintended side effect of creating the best outcome. This ethical theory stands in opposition to deontological ethics, which states that there are some moral duties to be held regardless of intentions or consequences. In this essay, I will argue that consequentialism is the most rational foundation for a normative ethical system and that, furthermore, deontological judgements only have value as moral rules-of-thumb called *prima facie duties*; I will then use this notion of *prima facie* duties to reconcile consequentialist and deontological moral philosophies into a normative ethical system that is both convenient and reliable, which I term *prima facie consequentialism*. Finally, I will conclude this essay by defending *prima facie* consequentialism against some anticipated objections that one may raise.

In effort to show that consequentialism is the most rational model for a normative ethical system, I would first like to utilize an argument from Aristotle's *Nicomachean Ethics*. Aristotle claims that in order to understand the human good, we must understand the purpose of the good. He writes "[s]urely it is that for the sake of which the other things are done; and in medicine this is health, in generalship victory, in housebuilding a house, in another case something else,

but in every action and decision it is the end, since it is for the sake of the end that everyone does the other things" (Aristotle [1995], *Nicomachean Ethics* I.7 1097a19-23). By this, Aristotle means to say that to know if something is good/effective, we must know its function; its end in its teleology, in other words. The rationale behind this is that we can then know if something is good by measuring how well it achieves that end; if it successfully achieves its desired function it is good, whereas it is not good if it fails to achieve its desired function. For example, one would not be able to make a statement on the goodness of a clock unless one understands its teleological aim—namely, to accurately tell time. But if one knows this goal, one becomes entitled to rationally say if that particular clock is good, based on if it performed its function well by consistently keeping accurate time. If one accepts this notion, one would also likely accept the closely related statement: "*to understand the moral good, one must know the function of morality.*" If this statement is true, then it seems to have implications for the rationality of a normative ethical system. Namely, if a normative ethical system is rational, it must respond to the function/reason of morality—the 'why' behind moral actions.

The question of why we ought to act morally is debatable, though one can still speculate and expect relative accuracy, as it seems clear that the purpose of morality seems to be tied more or less to *goodness*⁹. One answer that one might first arrive at is that we ought to be moral because it is good for the people as a collective whole. If this is true, then what is most moral is none other than that which is most beneficial to the collective whole; that which produces the best *consequences* for the collective whole. This is completely consistent with consequentialism. Deontologists, however, seem to require alternate reason(s) for the purpose of morality because deontologists suggest that there are moral duties that are to be observed *even if* breaking said duties were to produce the best consequences. For example, if one is a deontologist who believes that abstaining from murder is a moral duty, then one could not possibly justify murder, even if the situation were such that it would produce the best consequences (such as murdering a dictator before he causes the death of countless others). As such the deontologist cannot say that the purpose of morality is that we ought to be

9. By *goodness* I mean the flourishing of the collective whole. It should be noted that this collective whole implies *everyone*, not merely the *majority* of people—this disclaimer, I hope, protects this theory from certain criticisms.

moral because it benefits the collective whole—for the deontologist, there must be something more to morality's purpose. What this addition could be is not immediately clear, and until such an addition can be identified, this seems to suggest that consequentialism is the more rational theory to be base a normative ethical system upon.

In light of this, any deontological ethical system that does not simply state that one should always do what produces the best consequences for the collective whole is likely responding to some morally irrelevant factor(s). If this is true, then the irrelevant factor(s) should appear in situations where deontologists opt to take the action contrary to what produces the best overall consequences for the collective whole for some reason. This can be further examined via the trolley dilemma mentioned earlier. The consequentialist answer to this dilemma is to throw the switch because the result of one person dying is better than the five dying. The majority of people, including many deontologists, agree with throwing the switch in this situation. However, the trolley dilemma has numerous related dilemmas where interesting differences arise between the consequentialist and deontologist beliefs.

One such related situation is the footbridge dilemma, mentioned in part I; recall that this situation is usually met with more controversy. Many deontologists say that it is wrong to push the heavy person down from the tracks even though it would again produce the best consequences in that only one person dies as opposed to five because of certain moral duties that transcend any intentions or consequences. Immanuel Kant is perhaps the most accomplished and noted philosopher to take this view; he writes “[s]o an action’s moral value doesn’t lie in the effect that is expected from it, or in any principle of action that motivates it because of this expected effect. All the expected effects—something agreeable for me, or even happiness for others, could be brought about through other causes and don’t need the will of a rational being, whereas the highest good—what is unconditionally good—can only be found in such a will. So this wonderful good, which we call moral goodness, can’t consist of anything but *the thought of law in itself that only a rational being can have*—with the will being moved to act by this thought and not by the hoped-for effect of the action” (Kant 2008, 10). Kant clearly believes that moral laws/duties can be found through reasoning, and these duties ought to be followed under *any* circumstances.

Kantians can use such duties to help to explain the differences exhibited in the trolley dilemma as opposed to the footbridge dilemma. One duty commonly cited by Kantians to help explain that very distinction is the doctrine of double effect. Recall that the doctrine of double effect states that it is morally permissible to cause a negative effect as a foreseeable but unintended side effect of trying to cause some greater good. Applied to the dilemmas, this means that it is permissible to throw the switch in the original trolley dilemma because the death of the one bystander, though foreseeable, was unintended. The death of the heavy man in the footbridge dilemma is intended, and therefore immoral. By this doctrine, inflicting harm is better than simply allowing it; or, in technical terms, it is wrong to use somebody as a mere means, as the heavy man was used in the footbridge dilemma.

Although the doctrine of double effect may seem to be a reasonable explanation for the differences exhibited in the trolley dilemma as compared to the footbridge dilemma, if the looped trolley dilemma would be examined (recall that the looped trolley dilemma states that a runaway trolley is poised to hit five people, and, again, you can throw a switch which will send the trolley to an alternate set of tracks where one bystander is standing who will be killed as a result. However, in this case, the alternate set of tracks is looped back to the main set of tracks, so that if the trolley did not hit the one bystander and thus slow down, the trolley would return to the main set of tracks and again hit the five people). Because the death of the bystander in this case is necessary to save the five, as with the footbridge dilemma, it follows that the bystander is again used as a mere means. And yet, many people, deontologists included, believe that it is morally acceptable to pull the switch to save the five in the looped trolley case. As such, the idea that the doctrine of double effect can explain differences in general reactions to the trolley dilemma as opposed to the footbridge dilemma becomes doubtful.

This notion allows two questions to remain; what, then, explains the differences in reactions to the trolley versus the footbridge dilemma, and does this reason respond to morally relevant factors? Recall that these questions were discussed by Greene in *The Secret Joke of Kant's Soul*; he writes "[t]he consensus here [in the looped trolley dilemma] is that it is morally acceptable to turn the trolley in this case, despite the fact that here, as in the footbridge case, a person will be used as a means" (Greene 2015, 42). With the doctrine of double effect thus rejected,

Greene then offers an alternative explanation to the differences observed in reactions between the trolley and footbridge dilemmas; emotion. He claims that “deontological judgements tend to be driven by emotional responses, and that deontological philosophy, rather than being grounded in moral *reasoning*, is to a large extent an exercise in moral *rationalization*” (Greene 2015, 36). To apply this to the family of dilemmas mentioned earlier, Greene would say that the reason so many are willing to throw the switch in the trolley dilemma but not to push the heavy man down from the bridge in the footbridge dilemma is simply the result of unconscious emotions; physically pushing a person down from the bridge is much more emotionally traumatic than simply throwing a switch, and it is this fact that accounts for the differences in reactions between the trolley and footbridge dilemmas.

If this is so, it seems that deontological judgements are responding to factors that are morally irrelevant, or—if indeed they are at times reliable—they are prone to misfire, though this may not necessarily be the case. That is, it seems that one could reasonably argue that our emotions often seem to pique naturally in response to things we genuinely feel are wrong and would defend as such on a rational level, and thus emotions may actually respond to morally relevant factors. For example, one might feel sad or angry if they witness a person being robbed; and understandably so, as few would argue that stealing is generally immoral, aside from in some extreme cases. From this fact, one can conclude that emotions might have a morally relevant role in one’s life as a sort of guide that hints at something’s goodness or badness. A normative ethical system based on deontological obligations would therefore be reasonable, as even if deontological intuitions of obligation are largely responding to emotion, they would still be responding to something seemingly morally relevant.

From this it seems that deontology is still a reasonable approach to creating a normative ethical system; however, because of the volatile nature of emotions, I argue that this is not so. Nobody will argue with the notion that our emotions often lead us to poor decisions; an angry person may, for example, punch something in anger, seldom leading to anything more than an injured hand. This example shows that emotions are at very least unreliable guides for making judgements. Furthermore, if emotions can lead us astray in our everyday decision making, as seems to be the case, it is cogent to think that they can lead us astray morally, as well. Indeed, this seems to be the case, as illustrated previously by the distinction

between the footbridge and looped trolley dilemmas. Deontology, then, is certainly not an infallible approach to morality and if one wishes to create an infallible normative ethical system—the sort of universal template to determine if something is morally right that Plato’s Socrates¹⁰ and other philosophers have so vigorously searched for—then deontology will not do.

Consequentialism, however, does not suffer from this shortcoming. If it is true that the purpose of morality is simply to produce the best consequences for the collective whole as I have suggested earlier in this essay, then it seems a normative ethical system that is solely based on doing whatever produces the best consequences for the collective whole could never fail or misfire such as a system based on emotion. It is ultimately for this reason that I assert that consequentialism is the most rational basis for the creation of a normative ethical system.

But there is still something left unsaid for the value of deontological judgements; some deontological judgements might lead to correct moral decision in almost every case—murder, for example, can be thought to be immoral in *almost* every conceivable situation. Surely, then, one ought not to assume that deontological judgements are completely devoid of value; they may even hold a considerable amount of value, despite their apparent imperfection. This is clear even when looked under the lens of Aristotle’s function argument discussed earlier in this essay—to again take the clock example used previously, we would not say that a clock is not a good one for losing a second or two of time each year. As such, we should not try to claim that deontological judgements are not good merely because they have the minor imperfection of possibly leading us astray morally in certain extreme, isolated scenarios. Simply put, actions performed based off deontological judgements will *almost* always be morally correct, but there are extreme situations that render deontology ineffective. They therefore have value not as the absolute duties that Kant defended, but rather as what philosopher W.D. Ross called *prima facie* duties. I believe that philosopher Russ Shafer-Landau gave the best definition of *prima facie* duties in a commentary on an excerpt from

10. It is apparent that Plato—and perhaps Socrates—were interested in a universal template for determining the goodness of moral judgements, as in Plato’s *Euthyphro* dialogue Socrates inquires of Euthyphro to give him a model of which to judge the morality of actions, saying “[t]ell me then, what this form [of moral goodness] is so that I may look upon it, and using it is a model, say that any actions of yours or another’s that is of that kind is pious, and if it is not that it is not” (Plato [2009], 6).

Ross in his *Ethical Life*, defining a *prima facie* duty as “an always-important reason that generates an ‘all-things-considered’ duty, provided that no other reason or set of reasons is weightier in the situation” (Shafer-Landau 2015, 126). Under this definition, deontological judgements can have value, though they have what can be seen as a failing in that they are not universal—situations can arise in which the deontological judgements no longer hold normative value.

It is precisely this failing that consequentialist thinking patches, by acting as a filter for the flaws in moral reasoning that our emotions sometimes (but not always or perhaps even often) create. For example, a deontologist may claim that not killing is a moral obligation. This seems cogent, as most would agree that killing is *almost* always wrong. However, this same majority will often concede certain situations where extraneous factors seem to allow for killing, such as killing a dictator before said dictator causes death and suffering to those under his rule. This is nothing more than consequentialist principles testing deontological judgements and correcting for the extremity of the situation; a correction which seems to be based on nothing more than trying to create the best consequences for the collective whole. I term this normative ethical system of consequentialist-filtered deontological judgements *prima facie consequentialism* and will refer to it as such for the remainder of this essay.

As with any approach to ethics, this thesis is subject to criticism. One criticism that can be anticipated for *prima facie* consequentialism is that it may simply be a form of deontology in disguise. It may be the case that deontology is still applicable to the case of choosing to kill the dictator despite there being an obligation to avoid killing others if some other deontological duty so-to-speak superseded the other duty. To illustrate this in the context of the dictator example used previously, it may be the case that, although there is a deontological obligation to avoid killing another person, there may be another deontological duty to protect the well-being of other people that supersedes and nullifies the obligation to avoid killing another should these two deontological duties ever come into conflict. One can take this as suggesting that deontology cannot be so quickly dismissed.

While this worry certainly has merit, I believe that *prima facie* consequentialism can be derived and perhaps even strengthened by this concern. This is because if it is so that two deontological obligations can conflict with each other and one is *determined* to be of greater importance than the other and is thus carried out rather than the other, then unless the reasoning behind why one obligation should

be favored over the other is completely arbitrary¹¹, it follows that there must be a *determining factor* behind why that obligation was favored over the other obligation in the conflict¹². The most rational notion reason that could be given for such a favoring seems to be that in that situation, favoring that obligation as opposed to the other creates the best consequences for the collective whole; the obligation to protect the lives of the people outweighs the obligation to avoid murder because doing would be best for the people, who are the majority. If this is so, it seems that consequentialism underlies our decision making for what obligations one ought to follow should one find themselves in an extreme situation where the *prima facie* duty of deontology come into conflict with one another. In other words, consequentialism provides us with the criteria to rank the importance of deontological duties if they happen to conflict. This fact, coupled with the fact that one could doubt that the so-called obligations of deontology could even be able to be considered proper duty since situations can arise where they are nullified for the greater good, seem to credit *prima facie* consequentialism as true. A proper duty, that is, would seem to demand a sort of absoluteness that is missing from deontology. If the deontologist wishes to defend true deontology, they must find a duty that applies in every situation and circumstance without fail, one that is never irrelevant. But such a duty, it seems, cannot be found, for no matter how important of a duty one believes a duty to be, one can seemingly always think of an example of a situation where it might be best to forsake that duty in the name of producing the best consequences for the collective whole. As such, *prima facie consequentialism* remains plausible.

Another likely objection to *prima facie* consequentialism can be derived from another common deontologist objection to consequentialism; that is, that consequentialism is devoid of human emotion, which deontologists feel is an important foundation for morality. That is, they feel that consequentialism treats the process of making a moral judgement as nothing more than a sort of moral equation to be solved, which must abandon emotionally relevant aspects of life such as familial ties, friendship, and other aspects of life where one might have a duty

11. A premise that I feel most will surely wish to avoid.

12. This line of reasoning is again reminiscent of Aristotle's function argument of human goodness discussed earlier in this essay; that is, if one *prima facie* duty is determined to be more important than another in a certain situation, then it follows that there must be a purpose of why that duty was chosen relating to some teleological purpose—I argue that this purpose is to create the best consequences for the collective whole, the central premise of consequentialist thinking.

to be partial for emotional and trust-related reasons. The deontologist may claim, for example, that throwing the switch in the trolley dilemma abandons a certain aspect of humanity because it is done merely for the sake of saving more people; humanity, some deontologists go on to claim, must be much more complicated and emotionally deep than the mere numbers game the consequentialist appears to support. I, however, argue that this objection is founded on an inaccurate portrayal of the consequentialist in action. Those that object to consequentialism along these lines seem to see consequentialists as cold, unfeeling calculators who would willingly kill off forty-nine percent of the population if it would save the other fifty-one percent and would do so without reluctance or regret.

In reality, this is simply not the case; there is nothing that says that a consequentialist must be unfeeling about a *prima facie* duty broken in lieu of protecting a more consequentially relevant *prima facie* duty. Ross himself touches on this subject using the example of somebody breaking a promise for the greater good in his *What Makes Right Acts Right?* He writes “[w]hen we think ourselves justified in breaking, and indeed morally obliged to break, a promise in order to relieve some one’s distress, we do not for a moment cease to recognize a *prima facie* duty to keep our promise, and this leads us to feel, not indeed shame or repentance, but certainly compunction, for behaving as we do” (Ross 1930, 21). From this, it is plain to see that the consequentialist has no obligation to be emotionally devoid in making complicated moral judgements. In fact, the consequentialist is bound to feel a certain sense of loss if they were required to violate one *prima facie* duty for the sake of another—it is merely that the consequentialist knows that one must not allow said emotions to control their moral judgements, for they can mislead one if not filtered by reason.

Perhaps a more serious allegation against *prima facie* consequentialism that could be anticipated is a situation in which doing what seems to produce the best consequence for the collective whole requires doing an act so sickening that it seemingly could not be justified even if it did produce the best overall consequences. A commonly cited example that this can be seen in involves the *backpacker dilemma*, which is yet another sister dilemma to the trolley dilemma discussed earlier in this essay. In this dilemma, five people are in the hospital in dire need of an organ transplant to stay alive. As it happens, there is a backpacker with minor injuries in the hospital whose organs, if harvested, could save those five at the expense of his single life; however, the backpacker has no intention

of willingly relinquishing his organs for this cause, and they would have to be harvested secretly against his will as such. Note that this situation presents the same life/death ratio presented in each of the trolley dilemmas—namely, five people will survive at the expense of one death. As such, many people will claim that the consequentialist is forced to believe that the morally correct action is to harvest the backpacker's organs against their will. Many who accept this notion use this as a *reductio ad absurdum* argument against consequentialism, as it certainly seems as though there is something *clearly* immoral about harvesting the organs of the backpacker.

Even I as a consequentialist will admit that harvesting the organs of the backpacker seems very wrong indeed. However, I deny the premise that the consequentialist is forced to believe that harvesting the organs of the backpacker is the morally correct choice¹³. I deny this claim on the grounds that it may be a misinterpretation of what choice would actually lead to the greatest overall consequences for the collective whole. It is true that five lives may typically be more valuable than one, but the importance of certain principles may transcend the importance of even insuring that the greatest number lives; furthermore, what *would actually* lead to the greatest overall consequences is not always clear. To relate this to the backpacker dilemma, it may be that if the doctor were to harvest the organs of the backpacker, the trust patients in hospitals have that says that the hospital will do everything in its power to insure the lives of oneself might be negated, which in turn might lead to the consequence of people avoiding hospitals. This mass avoidance of hospitals from the grounds of lack of trust might actually cause more deaths than merely five, as those people who no longer trust the hospitals are prone to die from lack of being able to get necessary medical attention. As such, it can be said that *not* harvesting the organs of the backpacker might actually lead to the greatest overall consequences for the collective whole, even though on the surface of the problem five people die as opposed to only one. Therefore, the backpacker dilemma poses no real threat to *prima facie* consequentialism.

13. Although there is no *obvious* reason to necessarily claim that they shouldn't!

PART III: DISTINGUISHING FACTORS FROM TRADITIONAL UTILITARIAN ETHICS

For *prima facie* consequentialism, one important question still needs to be discussed; namely, is the theory merely utilitarianism in disguise? It could, after all, be said that the principle of always trying to create the best consequences, regardless of the is simply a reformulation of the traditional utilitarian doctrine of acting to create the greatest amount of happiness for the majority. This is an important question, as if *prima facie* consequentialism indeed cannot be distinguished from the traditional utilitarian framework, and as such synonymous with utilitarianism, then it will be subject to the same criticisms of that doctrine—criticisms which, as I believe I will show in the arguments to follow, I feel doom utilitarianism. To be sure, utilitarianism share many similarities and relations, and so this critique must be taken seriously. I believe, however, that *prima facie* consequentialism need not worry. In the following I will argue that *prima facie* consequentialism is distinct from traditional utilitarianism in several important respects which allow the theory to circumvent the problems traditionally associated with the utilitarian doctrine and will highlight these differences through example.

To begin our attempt at distinguishing *prima facie* consequentialism from utilitarianism, we must first come to a definition of utilitarianism. One standardly given definition of utilitarianism is a doctrine in which one ought to do what creates the most pleasure for the greatest number of people. John Stuart Mill, a proponent of utilitarianism, discussed this topic in his essay *Utilitarianism*; he says “[t]he doctrine that is the basis of morals is *utility*, or the greatest happiness principle, which holds that actions are right in that they tend to promote happiness, wrong in proportion as they tend to produce the reverse of happiness” (Mill [1863] 2005, 5). Is this view synonymous with *prima facie* consequentialism? Let us again consider the essence of *prima facie* consequentialism—it is an ethical theory in which our strongly felt moral intuitions serve as general *prima facie*—that is, rule-of-thumb—moral principles that, though reliable in most instances, must be broken in instances where certain two or more such rules cannot be simultaneously upheld because they are contradictory; and, in such cases, we must decide on which of the contradicting *prima facie* rules to uphold by using our best reasoning to try to determine which rule the upholding of which would lead to the best overall consequences for the collective whole. Again, we must ask—are these two ethical systems secretly the same? Upon the first analysis,

the two definitions seem to reveal two immediate distinctions; firstly, *prima facie* consequentialism makes mention of the existence of “rules-of-thumb” whereas utilitarianism does not; secondly, consequentialism uses “causing the best overall consequences for the collective whole” for its guide for deciding actions whereas traditional utilitarianism suggests “causing the greatest amount of happiness for the greatest number of individuals.” Are these differences relevant enough to distinguish the two doctrines? Each must be analyzed in turn.

First, let us consider the difference regarding the addition of “rules-of-thumb” in *prima facie* consequentialism, whereas traditional utilitarianism makes no such references to any such rules. Is this enough to distinguish *prima facie* consequentialism from utilitarianism? Even I, who insists that the two doctrines not be confused for each other, must admit that this does not seem to be a relevant distinguishing factor; after all, a utilitarian thinker could easily incorporate such rules into their own framework, if they so desired. For example, a utilitarian might say that it is a *prima facie* rule to avoid killing another, because such an action is anti-conducive of promoting happiness for the most. However, if somehow there was a situation in which killing a person was necessary to save five others, as in the *trolley dilemma* discussed earlier in this essay, they might say that that action were necessary, as the loss of one individual is less of a blow to the state of happiness in a population than the loss of five would be; if such rules conflicted, they would likely say to choose the one which most maximized the happiness for the greatest number. Asserting the existence of such rules does not in any way damage the utilitarian framework; the traditional utilitarian would likely omit discussions of such rules for the sake of theoretical simplicity, but as shown this need not be the case. Likewise, it seems that I could remove reference to *prima facie* rules and fall back merely on the consequentialist framework underlying the theory.

Why, then, do I feel that the so-called *prima facie* rules ought not be omitted? The answer is that that I feel keeping references to said rules helps to emphasize the point that my theory need not be viewed as an all-out attack against deontological ethical systems as consequentialist and utilitarian systems have often been made out to be. This is because that, while I do claim that such deontological judgements are actually cognitive heuristics that evolved in humans over generations of group-oriented living, and so would be tantamount to a naturalistic fallacy to base an ethical theory around *completely*, I do confess that many commonly proposed deontological duties, regardless of their status as cognitive heuristics, are often

excellent moral guides that save us much time in our moral reasoning, and can even save us from the failure of being “too late” in situations where action is urgently needed, such as swimming off to save a drowning individual. These rules save us valuable time that would have otherwise been spent applying the cognitive process—this seems to be true even on the a subconscious level; we, as individual humans, for example, when we cross paths with another individual in the street or some other public place, do not need to go through a process of reasoning to determine that it would lead to the best consequences for everybody involved to not murder that person where they stand and therefore that we ought not do it. It was obvious from the beginning that consequences of the murder would be worse for everybody than the consequences caused by the refraining from doing so; this knowledge seems obvious to us—practically innate even. In this way, *prima facie* rules are of great value; but when the situations become extreme and the upholding of two or more such rules would be contradictory, some of the rules must be situationally relinquished, and this relinquishing, I argue, ought to be decided by a ranking of *prima facie* rules based on what rules would produce the greatest consequences for the collective whole if upheld, a process that must be grounded in deliberate reasoning. Regardless, the underlying and important point here is that the neither the omission or the inclusion of *prima facie* rules is enough to truly distinguish *prima facie* consequentialism from traditional utilitarianism; we must look elsewhere.

We have seen that the first apparent difference between *prima facie* consequentialism and utilitarianism—namely, reference to *prima facie* moral rules-of-thumb—is not enough to save *prima facie* consequentialism from being synonymous with utilitarianism; this point is more of a matter of having a condensed versus an expounded theory. What then of the second apparent difference we identified between the two doctrines, namely, the fact that *prima facie* consequentialism suggests that we should decide our actions based on what “provides the best overall consequences for the collective whole” whereas traditional utilitarianism suggests that we should do “what provides the maximum amount of happiness for the greatest number of people”—is this difference enough to distinguish *prima facie* consequentialism from utilitarianism? The answer to this question will, of course, depend on if, when we say “creating the best consequences for the collective whole” we really mean the same thing as

when we say “creating the maximum amount of happiness amongst the greatest number of people.”

Well, then, are these statements synonymous? The idea does not seem at all unreasonable to suggest; after all, would not the greatest possible world—the greatest consequence achievable—be the world in which the greatest amount of happiness is garnered for the majority? Furthermore, does not my own ethical inquiry, in suggesting that we ought to search for the purpose of morality to determine what is the moral good—an argument analogous to Aristotle’s argument that we must know the function of the human in order to know what the human good is—sort of suggest that happiness would be the greatest consequence in that Aristotle finds happiness to be the end of reason, the human function, that which is desired for its own sake? All this seems true enough; in many cases, I would say that it is correct that the best overall consequence is the one that provides the greatest amount of happiness to the most people, and it is certainly true that I believe Aristotle’s function argument can help us discover the “why” behind morality. Despite this, I believe that in fact the statements “one ought to do what creates the best overall consequences for the collective whole” and “one ought to do what creates the most happiness for the most amount of people” are in fact *not* synonymous; to see this, each of these questions must be analyzed individually.

In terms about the point about Aristotle, it is true that I utilized his function argument, which declares happiness as the *telos* of the human function; however, in doing so I only intended to utilize the *form* of the argument, stripped of its constituents—just as we can discover if a clock is a good clock by knowing if it does its function—timekeeping—well, and how we can know if a human is a good human by knowing if it performs the human function well, I believe that we can know what the moral good is by analyzing the function of morality, which I believe is creating the best consequences for the collective whole. I did not use this argument to attempt to claim that the function of morality is the same as the function of a human—and in fact I believe there are some important differences between the function of the human and the function of morality, though they may in some ways be related; I believe this will become more apparent in the analysis to follow.

What then of the other claim, which stated that causing the greatest amount of happiness for the most amount of people would be the greatest consequence

an action could possibly attain, therefore revealing consequentialism as utilitarianism, only rephrased? As mentioned earlier, I believe not. To be sure, the attainment of happiness for the majority is likely often a major, and perhaps even often the single most important, consideration one ought to make when trying to act so as to create the best consequences for the collective whole, as *prima facie* consequentialism suggests. It is not, however, the *only* consideration one ought to make when trying to create the best overall consequences for the collective whole. It is here that I believe that the distinguishing factor for *prima facie* consequentialism and traditionally understood utilitarianism lies—in traditional utilitarianism, the *telos* used to determine what the best consequences is something fixed—usually the greatest amount of happiness. This is to say that the *telos* in utilitarianism never changes; this is made explicit by Mill, who said in his *Utilitarianism* “[t]he utilitarian doctrine is that happiness is desirable as an end, and is the only thing that is so; anything else that is desirable is only desirable as a means to that end” (Ross 1930, 24). In *prima facie* consequentialism, on the other hand, we need not be confined to only a single *telos*. *Telos*, in the case of *prima facie* consequentialism, should be looked at as the aim one feels needs to be sought to create the best consequences; it is that which fills in the blank of “one ought to do this or that particular action over another because it creates the best consequences in that it ____.” This is why I say that maximizing happiness for the majority is the single *telos* for utilitarianism—it fills in the blank mentioned above by deeming that “one ought to do this or that particular action over another because it creates the best consequences in that it creates the greatest amount of happiness for the greatest number of people.” Additionally, it seems we ought not confine ourselves to a single *telos*; having a single, fixed *telos* seems to me to be analogous to confining oneself to a single tool for any job despite a full range of tools available in one’s toolbox—and surely this is a problem, as some tools are obviously better suited for some types of jobs than others.

Some examples can help to clarify these points. Imagine, for example, a situation in which a person has five pieces of candy to be shared in any ratio amongst the five people, and each person will be happy so long as they get at least one piece. How should the person divide his candy? In this situation, maximization of happiness amongst the majority seems to be a fine *telos* to determine their actions—in this case, it seems that the person should give each person one piece of candy, as this would lead to the best consequences in that

the most people would end up happy through this action. This *telos*, however, will not hold throughout all situations—again, an example can show this. Imagine a society which is extremely prejudiced against some minority; the Nazi regime’s treatment of the Jewish people might be a true historical example of such a society. Consider, now, the idea that the majority in such a society may derive some sadistic pleasure from the abuse and killing of the persecuted minority; as the majority is the majority, this persecution would seem to maximize happiness in this situation—and yet, something seems clearly wrong here; if one wishes to agree with the statement that persecuting this minority is wrong, then they must concede that, in this instance at least, maximizing happiness is not a viable *telos* to follow in trying to create the best overall consequences for the collective whole. As such, some other *telos* must be found to explain this situation; in the example of the persecuting majority described above, this *telos* might be something like equality—that is to say that, in this situation, the majority ought not abuse the minority even if it would make them, the majority, happy, in that refraining from doing so leads to the best consequences by establishing equality amongst individuals—and, in this case, establishing equality is a more important *telos* than happiness for the majority.

It is clear now that *prima facie* consequentialism is distinguished from traditional utilitarianism in that while utilitarianism typically justifies its actions through only a single *telos*, usually maximization of happiness, whereas *prima facie* offers multiple relevant *teloses*, which can take precedent over one another depending on what the situation calls for. One question, however, still remains—how are we to decide which *telos* we ought to follow in a situation? I believe that the answer to this question must return us to the underlying framework of *prima facie* consequentialism, which suggests that one ought to do whatever leads to the best overall consequences for the collective whole; that is, one ought to attempt to determine all the possible *teloses* that could be relevant in that situation and then rank them according to which *telos*, if followed, would lead to the best overall consequences for the collective whole, noting again that the collective whole is *not* merely the majority of individuals in the world, but rather the summation of every single moral agent in our world. And so, from this it seems the ethical decision-making procedure for *prima facie* consequentialism is a two-part process; first, we must know what end, or *telos*, is the relevant end to follow for creating the best overall consequences for the collective whole. Secondly, one

must determine which *prima facie* rule, if any, is the most effective at pursuing said *telos*. This two-part process is what distinguishes *prima facie* consequentialism from traditional utilitarianism; because traditional utilitarianism only offers us one *telos*, usually maximizing happiness, one need not reason to find the which *telos* is best in that specific situation; the *telos*, maximal happiness, is already decided. As such, utilitarianism is different from *prima facie* consequentialism in that ethical decision-making process because only includes one part—namely, reasoning to determine what action will best uphold the *telos* of maximizing happiness. Because of this two-part as opposed to single-part ethical decision-making process *prima facie* consequentialism is distinguished from traditional utilitarianism, and helps the theory circumvent many of the problems typically associated with traditional utilitarianism, such as the one associated with the example of the majority abusing minorities to obtain happiness.

CONCLUSION

In conclusion, consequentialism is a more reliable basis for a normative ethical system than deontology because it seems to respond to the function of morality—namely, to create the greatest overall consequences for the collective whole—whereas deontology seems to at respond to factors that are at least partially morally irrelevant/fallible, namely emotion. Regardless of this fact, deontological judgements have value in that they seem to *usually* lead one down the correct moral path—it is only in cases where two or more deontological duties conflict that this can fail to be the case. These duties, which are morally relevant until extraneous details of a situation nullify their importance, are known as *prima facie* duties. It is consequentialism that allows us to choose between *prima facie* duties in situations in which they conflict, as we are obligated to choose to fulfill the *prima facie* duty whose fulfillment will create the greatest overall consequences for the collective whole. This principle may sound like it is merely a rephrasing of traditional utilitarian ethics, and therefore subjectable to the heavy criticisms associated with traditional utilitarianism; however, *prima facie* consequentialism should not be confused with utilitarianism in its traditional sense because utilitarianism typically only offers one *telos* to direct us to the greatest overall consequences (usually maximizing happiness), whereas *prima facie* consequentialism allows for numerous possible *teloses* as well as a system to rank them; such an addition allows *prima facie* consequentialism to avoid running into

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the criticisms associated with traditional utilitarianism. It is therefore the case that if one wishes to form a normative ethical system that can be universally applied to every moral judgement, one could not do better than the doctrine of *prima facie* consequentialism.

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Defining Illness

Patrick Ewell

University of Michigan-Flint

BIOGRAPHY

Patrick Ewell is a recent graduate from the University of Michigan-Flint. He is anxiously awaiting responses from various graduate programs.

ABSTRACT

Illness and health are deceptively strange, and peculiar concepts. On the surface, they seem straightforward and simple. They seem like opposites, squarely housed in neat little boxes. However, when it comes time to define these concepts, it becomes difficult to articulate exactly what it means to be "sick" or to be "healthy." Some people that seem to be "healthy" may indeed be "sick."

KEYWORDS

Health, Illness, Disease, Bioethics, Katskee vs Blue Cross/Blue Shield of Nebraska, Social Health, Philosophy of Health, Concepts of Disease and Health

THE STORY OF SINDIE KATSKEE

The stagnate air is thick with tension and worry as a set of needles sting Sindie Katskee's arm. Each of the little points slice through her skin, and steal a little blood. Days later, in an off-site lab, a series of fancy machines spin and churn. Once finished, strings of numbers are printed out, compiled and handed back to Sindie's doctor. Within seconds the doctor works through the strange numbers, translating them into words packed with deep and horrifying meaning. The test results suggest his patient is at risk for cancer. Once he factors in her family history, he decides there is definitely a risk that cancer will develop somewhere within her reproductive system. With the tests completed and the data analyzed, the doctor records the official diagnosis, which is "a genetic condition known as breast-ovarian carcinoma syndrome" (Menikoff 378).

Like a cruel addition of fate, two weeks before Sindie is scheduled for an "abdominal hysterectomy and bilateral salpingo-oophorectomy" (Menikoff 378), a notice from Blue Cross arrives in the mail. As she reads over the letter from her health insurance company, fear that's remained coiled in her bones, lashes out whipping her body in violent waves. Blue Cross has declared they will not pay for her surgery, even though her doctor claims it the most "medically appropriate treatment available" (Menikoff 378). Blue Cross claimed she was free of cancer, and therefore not sick. They stated Sindie's condition was only a "predisposition to an illness" (Menikoff 380), not an illness.

After the surgeons have washed away the blood from their tools, and Sindie is no longer at risk for cancer, she finds herself locked in another battle. This time, she is fighting Blue Cross in the courtroom. After tracing their way up, the court system, Sindie's legal team argued before the Supreme Court of Nebraska, who ultimately ruled in her favor. The court declared that her condition was a "deviation from what is considered a normal, healthy physical state" (Menikoff 381). This meant that she was indeed sick.

BINARY HEALTH?

Cases like Sindie Katskee's represent the dramatic scrimmage between several forces swirling around the healthcare field. In Katskee's case, this battle was played out between a pair of medical professionals, an insurance company and the judicial system. Throughout Katskee's story, each group offers their definition of the term "illness." However, this cluster of definitions does not help illuminate

the murky corners of "illness." These definitions muddy the waters, rather than raking them free of irritants and purifying them. Of these three groups, I feel that the medical professionals are best qualified to offer a meaningful definition of "illness." However, their definition is not immune to risks and potential problems. With these problems in mind, I crafted a definition of "health" and "illness" in an attempt to describe the enigmatic and vibrant relationship between these two concepts. My definitions will insulate medical professionals from the number crunching, money focused mindset of insurance companies so they might provide quality care to their patients. Moreover, my definitions are an attempt to change how we think about health and illness.

Medical professionals have a binary system of health and illness. Patients are either in the "healthy" category or they are in the "sick, ill and diseased" category, there is no in between. The difference between each category is crisp and defined. Patients may pass into the "ill" category if a doctor diagnoses them as such, otherwise they are locked firmly in the default "healthy" category. The insurance company also uses a binary system to determine who is healthy and who is not. However, their requirements to be placed in the "ill" category are more stringent. This is because the more treatments they pay for, the less money they retain. Lastly, the judicial system, in this case, followed suit and employed a binary system. However, they included "genetic predispositions" to the category of "ill." This falls in line with the medical professionals, as they too include genetic abnormalities in the "ill" category.

The definition of "illness" that arises out of the court's decision worked great for Katskee. Their ruling may even benefit other patients that are fighting their insurance provider so they can receive much needed treatment. However, the court did not create a new definition for illness, they merely agreed with the one the medical professionals issued. While their decision did add Katskee's "genetic-predisposition-to-cancer" to the "illness" side of the spectrum, it did not craft anything new. Some might think the court systems are the most appropriate entity to construct the definition for "illness" since they are the least biased group. They have nothing to gain from expanding the definition of "illness" to include one's genetic inclination, for example. The Courts would be the least biased of the three groups, however, I do not think they should be writing definitions for "health" and "illness." The Judges consulted *Webster's Dictionary* for a more common definition of "illness." Then, they flipped through *Dorland's Illustrated*

Medical Dictionary in search of a more technical definition. They did not attempt to manufacture a definition. They simply *picked* a version which they agreed with most. Doctors, on the other hand, must examine the body and determine what is normal and abnormal. I believe this investigative process, and the knowledge that results from it, is vital to creating a meaningful definition of illness.

As I said, the Court's decision added genetic predispositions to the already complex definition of illness. This addition does not improve the clarity of this term, in fact, I believe it increases the murkiness of the concept of "illness." While this does "expand" illness, it does not help map out the borders. The edge of illness remains foggy and unclear, even by including genetic problems in the realm of illness. Seemingly in response to this complaint, medical professionals invented a binary system, as there are just two categories; illness and health. On the surface this binary system is clear and understandable. However, this is not the case. The fact Blue Cross and Katskee's doctors arrived at two different interpretations of illness suggest that even with a binary system in place, illness and health are difficult to define.

Sonia Suter, a lawyer that focuses on bioethics, discussed problems associated with this system in an article for the *Journal of Law and the Biosciences*. "Working within the binary structure of health and disease, the common theme has been that individuals with genetic pre-dispositions lie on the side of health, as opposed to disease" (Suter). Such a definition could lead to discrimination with employers, perspective employers and insurance companies, according to Suter.

In addition to these sources of discrimination, a binary system makes it easier for medical professionals to abuse their patients. Depending on a patient's genetics, doctors may urge them to receive treatments that are ultimately unnecessary. A rather vain doctor might even *delay* treatment to benefit their research. Imagine a patient similar to Katskee, who is gripped with worry as they seek out an oncologist. After the doctor preforms a few tests the patient is diagnosed with a similar condition. Their genetic make-up and family history suggest they are pre-cancerous. This particular doctor, being rather selfish, yet forward thinking, does not tell the patient about their condition. The doctor *clears* them of any abnormal risk of cancer. Years later, after the cancer has bloomed and begun ravaging their body, the patient returns to the doctor in need of treatment. Now, the oncologist gladly begins treating the patient, gently guiding them toward a new experimental treatment they have been researching.

This is a terrible and extreme example, but I feel it is within the realm of possibility. Doctors are not infallible. They are human, and while they may have their mind set on what most people would consider the proper end goal, they can unfortunately suffer from lapses in judgement at times.

DOCTORS AND LAWYERS

The Katskee case does more than just offer a new definition for the concept of illness. It highlights a disturbing aspect of how the healthcare system operates in the United States. Insurance companies are allowed to label patients as either sick or healthy. Of course, when an insurance company “diagnoses” someone “healthy”, they liberate themselves from their obligation to pay for treatments. This in turn saves them money, which is the goal of any business. This task is simple for the insurance company, as they only need to create a definition for illness, and include it in their policy.

An insurance company may never confess the motives behind their decision to not pay for someone’s treatment. However, it is entirely possible they do not pay for treatment because it is expensive. After all, as I mentioned, the goal of every business is to make money, not continually spend it. If this is the motive behind an insurance company’s decision, this shows they are placing a higher value on money and their bottom line, rather than on human life. Such actions are intolerable. Even when this is done in the company’s best interest, that is, denying treatment is done because it is a smart business move, the overall action is still disgusting.

I feel it is problematic to allow an insurance company, or any entity that is primarily trying to better itself, to control what happens to our sick and dying. There are sneaky ways these companies could maneuver along legal avenues to get out of paying for treatment, as Blue Cross attempted to do with Katskee. I feel the burden of defining illness should be left to the medical professionals and scientists that have dedicated their lives to understanding the human body. These individuals have a deep wealth of knowledge detailing the human body. They know how it should function. They know how to determine if a symptom is merely a quirk for an individual patient, or if it is a warning for an impending illness.

From my understanding, the Medical Community has the least to gain by forming a definition of illness. They are not seeking to improve their profits, nor are they supposed to be seeking fame, as the purpose of the medical profession

is to treat and prevent illness. The expressed purpose of the entire collection of medical professionals, no matter their title or level of education, is to heal their patients. Doctors are to provide their patients with treatments that relieve them of their plight, not ravage their bodies, drain their bank accounts or earn the hospital a few extra dollars.

Despite the ever-helpful persona put forth by the Medical Community, medical professionals and scientists are not immune from abusing a patient or their circumstance. Sometimes a physician may harm their patient, even though they are attempting to heal them. The nature of medicine and healing is treacherous, and spiked with unknown hazards that cast the best and most dedicated individuals away. Despite these faults and perilous conditions, medical professionals, and their allies are an absolutely necessary part of our society.

Medical professionals can easily find themselves in a snarled mess. There is a grand financial temptation threatening to overpower their better judgement. Such issues may crop up if a doctor is told they will receive financial incentives from a pharmaceutical company if they place patients on an experimental drug. Perhaps the new drug will help their patient, and cure them of their ailment; however, it may also worsen their situation. There will be limited data on an experimental drug, especially if it has only just begun human trials. Other doctors may need more patients for research purposes. This might cause a doctor to expand their definition of illness so more people qualify for their research project.

The possibility for abuse is extensive and should not be taken lightly. When medical professionals make mistakes, and perform unwarranted treatments, they are pulverizing the line between "healing" and "harming." However, at their core, medical professionals are supposed to operate with the intent of healing their patients. This constructive notion should propel these negative possibilities far from reach, and purify the actions of the Medical Community.

Courts interpret the laws and cases lawyers argue before them. They are not supposed to create something brand new in their ruling. I believe this lack of creativity disqualifies them being able to define illness. Similarly, insurance companies exist to make as much money as they possibly can. Their goal is not to heal or help a patient. This lack of genuine interest in the patient's wellbeing removes them from being able to define illness. Medical professionals, on the other hand, actively try to help the sick and the dying. At their core, medical professionals wish to dissolve injuries and promote their patient's health. While

trying to mend their patients, medical professionals gain immense knowledge of the human body, which not only aids them in the healing process, it ensures their ability to properly diagnose. These qualities make them uniquely qualified to define illness.

A NEW DEFINITION OF ILLNESS AND HEALTH

I reject the notion of being *either* sick or healthy. I propose that we are always ill, to some degree. Some people may be sicker than others, which may guide some to believe they are not ill, however in fact this is impossible, due to the complex relationship between "health", "illness", and the ever-changing landscape they produce.

One extreme interpretation of my proposal would include disavowing the term "health", and decommissioning it from our lexicon. Given that "health" and "illness" are, broadly speaking, opposite concepts, I do not feel this interpretation is bizarre or unwarranted. We would not have to change much either. For example, instead of "health care" we could simply receive "care." Simply employing this term is appealing because it evokes a more holistic vision of care, one where our bodies, minds and world are cleansed and repaired. However, I do not think we have to revise our vocabulary this much. Rather, I think we should accept that illness is much more pervasive than we currently believe. Illness is routine, and should not be marked with an evil, or gloomy stigma. This does not mean we should be cheerful when someone is diagnosed with cancer, however, we should not look down upon those who are sick either, because we are all sick.

In order to visualize my understanding of health and illness, and their dynamic relationship, imagine a spectrum where each end is a fixed point. The spectrum itself represents health. Somewhere along the spectrum rests a highly mobile, and ever moving slider. This piece represents the individual. The slider's unending movement is governed by numerous variables. For example, exercise habits and cancer, over eating, and genetic health conditions all help push and shove the slider along in a given direction. Some of these variables, such as cancer and eating greasy food would be tossed into the illness pile. On the other hand, exercise and chemotherapy would be reserved for the treatment pile, as both of these endeavor to counter act some ailment.

Illness falls upon a person for any number of reasons. Someone may not manage their diet properly, while someone else may injury part of their body while

climbing a mountain. Still another may inherit some illness from their parents. In all of these cases the individual stricken with the illness receives some damage to their health. This damage may be permanent or temporary depending on the specific illness. Perhaps even someone may be born with an affliction that not only permanently damages their health, but causes other damages, if it remains unopposed.

Picturing the spectrum, one end is painted with the label "Death" or "Dead", and the opposite end embraces the title "Maximum Health." The end entitled "Dead" is universally accessible by all. This end specifically denotes the physical death of the body, and therefore the death of all types of health for the individual. Everyone will one day reach this end of the line, and never return from its murky surface. As an individual "approached" this end of the spectrum, they would ideally receive medical treatment designed to combat their illness and push their health upward.

The opposite end is quite different, since it is impossible to reach "Maximum Health." This end represents the fictional, normative vision of health. There are several components of health, all of which are difficult to maintain at once. These components mesh together, and melt over the heat and friction of the continual movement of the slider. As these components slosh around, they manufacture what could be considered an individual's level of health or health status.

"Health" consists of four components: Biological, Mental, Social and Environmental. Already, just by listing the types of health, it is easy to see how it would be difficult to keep all four of these categories "maxed out" at the normative end of the spectrum. For example, it would be very difficult to boost one's environmental health since the factors that impact it are not all under the control of the individual. Some entities that damage this aspect of health, such as pollutants in the air or water, were placed there by other people. These toxins may even have been released into the world by previous generations that are now long dead.

Biological health (or physical health as some call it) refers to the type most often brought up when "health" is discussed. This component deals with the material body; the heart, finger nails, teeth and bones. One's genetic makeup is included in this section. This is one of the most straight forward, and familiar parts of health. As I argued above, this area needs to be governed by medical

professionals. Medical Doctors, for example, are the best equipped individuals to diagnose and address issues that arise within the body.

Mental health is closely related to Biological health. These two influence one another and alter one another regularly. For example, depression and stress can have a physical impact on a person. Depression may lead to suicide or self-harm, while stress can damage the heart. This is another commonly understood element of health, however I feel it is often forgotten about, even though it directly impacts biological health. Medical professionals are again, well trained in this field, and should be the only individuals defining and treating a patient's illness.

Social health deals with social relationships. These relationships could be as simple as the interactions between an individual and their best friend or they could be as complex as the relationships between citizens of a large nation. Again, this layer of health has impacts on other areas. *Prima facie*, Social health is largely connected to Mental health. If someone fights with their spouse, and they feel upset about it, their Mental and Social health will take a small hit. This hit is not necessarily calculable; however, it is absolutely noticeable to the individual.

Environmental health, as I touched on above, involves the connection an individual's environment has on them. This part can have nasty effects on the Biological health, if, for example, an individual drank lead infused water for decades. Crime, pollution and having limited access to nutritious food are other negative factors that drag one's Environmental health down, along with their Biological health.

Biological and Mental health explicitly deal with the body and the negative effects a given illness may have on the body. Social and Environmental health primarily deal with factors external to the body, though they account for the damage inflicted on the body. For example, there is not an internal structure or organ in the human body that is connected to Social health. Having an argument with someone will not spur a disease to infect the body. However, stress from a bad or failing relationship may damage the body. Likewise, an angry individual armed with a firearm may annihilate their spouse or friend.

It is a mistake to place too much thought on this spectrum and the slider. They are only a tool designed to increase the understanding of the intensely complex relationship between "illness" and "health." Moreover, they simply help one's visualization of my definitions of "illness" and "health."

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We should not think certain illnesses will drag someone's slider closer to death than other illnesses. Thinking in such terms would mean we missed the point. While the preverbal common cold is less dangerous than overdosing on heroine, both would "drop the slider"; however, we should not be concerned with quantifying the exact position of the slider. Doctors, for example, would not whip out a chart and start crunching numbers to determine where they land on my scale. They would focus on treating the physiological problems afflicting their patient. This does not mean doctors would treat people waiting in the Emergency Room in a linear, first come first serve, fashion. The rules of triage would still apply, as priority cases would still be taken back first. Victims with gunshot wounds would be treated before individuals with a tummy ache.

With this system of "health" and "illness" all of the practices associated with healing the sick and injured, would remain firmly within the realm of medicine, as I mentioned above. Insurance companies and actuaries would no longer taint the Health Care system. Providing care to a patient would not be determined by the cost of the procedure, but rather, it would have been determined by necessity, availability of medical resources, and the will of the patient. This freedom would allow medical professionals room to craft more effective treatment plans that actually promote a holistic view of health, rather than focusing purely on Biological health.

The negative stigma swirling around illness would drain from our communities because illness would no longer be unsuspected or thought of as something tragic. This does not mean people should rejoice when a patient is considered terminal. Death should evoke sadness, but ultimately, death and illness should be expected. Disrespectful banter, as well as frivolous and offensive thoughts, that surround patients should dissipate once we accept the abundance of illness. Given the plethora of illness, people will feel less despicable about a given illness, and cast less judgment toward those suffering. Negative, and critical, attitudes directed toward individuals with mental illnesses, for example, would fade away. Casting shame upon someone because they are autistic would be like shaming someone because they have two legs. It may take a while for the negative connotation to fade from highly stigmatized illnesses, like HIV, however overtime such stains would dissolve.

CRITIQUES

Undoubtedly, there are drawbacks to my view. The biggest being that it will be very easy for the Medical Community to levy great influence over the lives of their patients. Doctors may wish to treat their patients around the clock for their various symptoms and known illnesses. Over treatment could become a big problem. However, this problem already has a remedy that is currently employed in the medical world. Patients would not have to undergo any procedure or treatment they did not want. For example, patients would have to give their consent to a surgeon, before they are sliced open. Thus, patients would have the final say, and have full ability to not receive care.

Even with the solid barrier of informed consent, doctors may still be able to convince their patients they should receive treatment. As with almost every issue in the arena of Medical Ethics, this is a double-edged sword. The patient may need a treatment in order to stay alive, however, for some reason, they do not want it. It would be ridiculous for a doctor not to pursue this patient and try to convince them otherwise. After all, a doctor is supposed to focus on improving the health of their patient, and not providing them with a treatment that will save their life is counterproductive. However, the patient's wishes must always be honored, even if that includes not treating their illness.

Of course, as I mentioned above, doctors may act with a selfish vigor, when trying to convince a patient to undergo a treatment. Doctors could misuse their position as an authority figure to coerce patients into doing whatever they want. Physicians may guide their patient toward a lifesaving treatment, and insist they undergo the procedure, even after the patient continually resists. Other doctors may push a patient toward a treatment plan, so they can further practice their craft. For example, a surgeon may try to convince a patient they need a complex and dangerous surgery simply, so they can be involved with the procedure.

Dismantling the ideology of a malicious doctor would not be easy, nor is cancelling out abusive situations like the ones described above. However, at the core of medicine is the concept of healing. Doctors should not wash their patients with waves of unnecessary agony. Doctors are supposed to slice away the diseased and putrid parts, allowing their patients to go on with their lives. Doctors are supposed to rebuild bones once they've been obliterated, and retrain their patient's arms, legs and hands so they can function again. There is a genuine concern about corrupt doctors mistreating their position, however, once a doctor

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snaps the barrier between restoring-a-patient and exploiting-their-condition, they are no longer healing. They are acting in a brutal manner and unleashing mayhem upon their patient. Doctors need to adhere to the notion of “healing” their patient. Straying from this idea can foster situations where the bodies of patients are damaged, and sometimes destroyed.

TO CONCLUDE

Illness and health are very peculiar concepts, even though they seem straight forward and simple. In some ways, they are even considered opposites. However, they are thoroughly connected by every fiber and strand. One positive swing of one’s “health” pivots “illness” in an appropriate direction. Carrying a malicious pathogen will taint one’s health and promote the growth of illness.

I agree with the decision reached by the Supreme Court of Nebraska in the case of Sindie Katskee; I believe that doctors should craft definitions of illness, and by extension health. Insurance companies should have no place in creating these definitions, as they are swayed by other motives. Like any business, they want to make money. While doctors are not immune to problems and corruption, at their core, doctors are supposed to focus on healing their patients and advancing their health. I believe this fundamental notion will help restrain them, and whatever greed they harbor.

I have pieced together my own definition of health and illness. My definition for illness is inclusive, like the one pitched by Katskee’s doctors. It includes some maladies, such as genetic pre-dispositions, that are often left outside of the “illness” category. However, according to my view, health and illness are not static. Our health fluctuates, as it is constantly under siege by a variety of illnesses. Our actions and decisions all impact our health, as it evolves second by second. Eating greasy food and not working out will have an adverse effect on an individual’s health, while exercising will promote more desirable results. Furthermore, we are not sick or healthy, rather, we are always sick.

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Neuroscience and Property Dualism

Samantha Hortop

University of Michigan-Flint

ABSTRACT

This paper explores neuroscience and psychology as evidence for property dualism. This paper argues that neuroscience and psychology has not provided evidence that the mind is material, and in fact, gives evidence that the mind is a property of the brain. As neuroscience and psychology are newer sciences, there is a possibility that materialistic evidence for the mind could be found; however, this paper argues that for now (and as long as the trend of the sciences continue) that psychology and neuroscience give evidence for property dualism.

KEYWORDS

Property dualism, Occam's Razor, Neuroscience, Psychology, Dualism, Mind

INTRODUCTION

In philosophy of mind, there seems to be a never-ending argument between theories where no one can solve all the problems his/her theory has. This paper cannot solve all the problems with property dualism; however, it can respond to some criticism and provide support for a theory that is often ignored in the conversation of philosophy of mind. Property dualism allows for dualism in context of neuroscience, which is a huge problem with some other theories, such as Cartesian substance dualism, reductionism, and behaviorism. Neuroscience (a normally materialistic field) has not been able to provide a materialist explanation for the mind, furthering the idea that the mind is probably immaterial.

Unsatisfied with arguments for interactionism when it comes to understanding the mind, property dualism offers an alternative to people who are committed to dualism. Property dualism is a theory in philosophy of mind that still posits that the mind and body are separate, but there is not an interaction between them as with the Cartesian substance dualism. Property dualism instead posits that the mind is an immaterial property of the brain. When I say property of the brain, I mean that mind is an immaterial feature of the brain that is separate from the brain as it is its own thing and emerges once a brain gets complex enough. Specifically, qualia and intentional states (the two properties that make up mind) are immaterial properties of the brain, or as Jacqueline (a property dualist) says, “[t]he ineliminable and irreducible properties [that] many thinkers have held to be essential to the mind, as opposed to the body or brain” (Jacquette 1994, 38). Qualia refers to the feelings and attitudes one has while interacting with the world around them. Intentional states are thoughts, doubts, ideas, etc. a person has. These two immaterial properties combined are what we call mind, according to property dualists. Qualia and intentional states also allows for evolutionary emergence of mind from complex material (life emerges from inorganic matter, difference is that immaterial mind emerges from physical brain because it cannot be explained by the complex brain).

Jacquette identifies a few objections to property dualism. The first objection I will focus on in this paper is the eliminativist and reductionist objection. This objection raises the idea of Occam’s Razor, the thought that when competing explanations of a phenomenon exist, the simplest answer that still can fully explain the phenomenon is the theory that should be accepted. Jacqueline responds to the reductionist’s idea that the mind is simply a term we use for certain brain

processes by saying that “[t]here is nothing particularly praiseworthy about a philosophy of mind that is simpler or more economical than its competitors if it is false or explanatorily inadequate” (Jacquette 1994, 40). In other words, Occam’s Razor only applies if mental processes do not need a dualist idea of the irreducible, immaterial substance. Jacquette goes slightly more in-depth with his argument by saying that “if the mind has properties that cannot be eliminated or reduced or explained in behavioral functional terms, then it is necessary after all to include [the immaterial properties of the brain]” (Jacquette 1994, 40).

NEUROSCIENCE AND PSYCHOLOGY

Furthering Jacquette’s argument, the hard and soft sciences have not provided any evidence that would allow for the elimination of the immaterial mind. The brain itself is a very complex thing. The neurosciences have made great strides in trying to understand the brain; however, they have not even come close to explaining the brain (such as understanding where to find Broca’s area, which is the area associated with speech production, but cannot explain why that area is associated or how it works in terms of the mind), which is of itself material. And while the eliminativist denies an immaterial mind (and actually the mind in general), neuroscience cannot yet explain mental states in terms of brain processes, which, again, is the eliminativist’s claim. There is evidence that although parts of the brain specialize (such as Broca’s area for language) not every human has the same area of the brain that specializes. In the case of Broca’s area, the majority of people have the language center of the brain in the left hemisphere, but there are a minority of people who have it in the right hemisphere. This discovery directly contradicts the thinking that specific brain processes correspond to specific “mental states”¹. This evidence from neuroscience seems to pose not only a problem for the reductionist, but for the eliminativist as well. The structure of the brain can be different without abnormal behavior. There have been cases of large sections of the brain, either taken out by surgeons or deteriorated due to a disease, that lived normal lives, and in the cases of deterioration, would not have known about their abnormal brains if it had not been for the brain scans.

1. In order to keep the paper focused, I will not go into much depth about Identity Theory, which is a reductionist view of mind. There are two types of Identity Theory. The stronger of the two is type-type meaning that a brain process corresponds to a mental state, or everyone that has this brain process will have this mental state. I briefly discuss how the science seems to disprove this late in the paper, but due to time, I will be skipping a more in-depth analysis.

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The plasticity of the brain seems to give evidence for a mind that is an immaterial property of the brain. The brain can rewire itself to perform tasks that should not be able to be done according to a healthy brain. The eliminativist and reductionist points of view cannot account for this evidence because they are committed to the idea that either the mind can be reduced to the brain or that there is no mind. In a property dualist point of view, one can account for this plasticity in the brain because mind is a property of the brain. In fact, qualia and intentional states are as much of a property of the brain as the plasticity is. So far neuroscience has not come up with a material explanation of the brain; however, taking the a property dualist stance, the science seems to make sense.

In psychology, while behaviorism was the dominating thought for many years, cognitive psychology has since replaced behaviorism. A main reason for this shift in focus was that there are numerous human behaviors that do not seem to form due to reinforcements that condition the behavior. One example is lying, which is a thing our parents try to condition us not to do. Another example is killing, which is a thing society tries to condition us not to do. These examples are behaviors that arise despite of conditioning. Another reason for shifting focus was that explaining all "mental states" in terms of behavior is difficult, such as the intentional states. For example, a belief is difficult to define in terms of only observable behavior. Cognitive psychology looks at the mental states instead of the behavior using the techniques of behaviorists. Generally speaking, most psychologists acknowledge that mental states are invisible, yet, predictable due to similar behavior in a fixed set of circumstances. Basically, the intentions and qualia are not directly accessible through outside observation, but through self-reporting by the subjects. From these self-reports, intentions and qualia may be better predicted, but there is always the issue of the accuracy of self-reporting because of the human tendency to lie or just act abnormally due to being in an experiment. So while a self-report is the only way to understand the private intentional states and qualia, observable behavior is still what psychologists study most of the time by the ways of carefully constructed experiments, but without the idea that observable behavior is the best and only way to understand the mind. Often a self-report is included with the experiments.

After looking at the sciences, applying Occam's Razor seems only to support property dualism. There seems to be a problem with positing that the mind is merely material that so far neuroscience and psychology cannot explain. If the

mind cannot be material, a dualist point of view must be taken. If a dualist point is taken, Cartesian substance dualism, in the context of looking at other theories, is the most complex and posits the most ideas because it posits that there is an interaction between the immaterial mind and material body/brain, while property dualism does not posit this interaction as, in property dualism, the immaterial mind is a property of the brain, namely intentional states, such as thoughts and beliefs, and qualia, meaning what it means to experience the world around oneself.

To be as clear as possible, if neuroscience comes up with a completely materialistic explanation for the mind, then my paper will have to change. That being said, I do not think that this explanation will come about because of the trend of neuroscience pointing to the separateness of the mind from the body, and I expect that this trend will continue. I also mentioned Identity Theory earlier in my paper. Type-type identity theory does not seem like a threat to my paper as previously stated. Token-token identity theory is not much of a threat either, and is not entirely incompatible with property dualism. Token-token identity theory states that for any single mental thing (qualia and intentional states) it is associated with a single brain process. It does not claim that these will be universal even to that individual. Because property dualism claims that the mind is a product of the brain, it seems to make sense that qualia and intentional states would be associated with brain activity, but not caused by them. If there is a causal connection between them as stricter token-token identity theorists would claim, then my paper would need to be re-evaluated. So far, neuroscience and psychology have not given us any evidence that this causal connection is true.

CONCLUSION

To conclude, property dualism is often a forgotten theory when it comes to the philosophy of mind. Often the conversation turns to materialist theories such as reductionist, eliminativist, and behaviorism. When dualism is discussed, it is often Cartesian substance dualism. Each theory, including property dualism, has its faults; however, while looking in the context of neuroscience, property dualism seems the best fit at the moment because there is not an issue applying the theory when it comes to different structures of the brain people may have and still function as healthy people. Occam's Razor is often used against dualism in general, but especially property dualism. Applying Occam's Razor in the mind discussion does not seem necessary because there are other issues to be looked

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at first, such as neuroscience and psychological evidence; however, if applied property dualism comes out looking as the leading theory.

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Human Standards of Commodious Living

Hamzaullah Khan

University of Michigan-Flint

ABSTRACT

Basic rights aren't being protect within society in the ways that they should be. In addition to lack of protection, basic rights aren't being viewed as equal to each other. This perception of right inequality leads to certain rights being under protected and eventually forfeited by society. One example of a right that isn't seen as worthy of protection in the way it should is the right to material goods. Every member of society should be guaranteed access to basic material goods such as food and water. These basic rights are not just demanded for the good of the individual, but for the good of society as a whole. Without the protection of all basic rights members of society cannot reach their full potential or live commodious lives.

KEYWORDS

Commodious Living, Basic Rights, Material Rights, Physical Security

I. INTRODUCTION

The intent of this essay is to outline the most basic standards that every human being must demand from their society in order to live commodiously. These standards will be mostly demanded from the commonwealth which that human being is a citizen of. I will address the demands as two different categories; rights and commodities. Rights will include the moral and social standards that the commonwealth must uphold and commodities will include the institutions and material goods guaranteed by rights.

Henry Shue does a great job of outlining the need for morality and basic rights in his appropriately named book *Basic Rights*. We will use his definition of basic rights for the understanding of this essay. Shue describes basic rights as "everyone's minimum reasonable demands upon the rest of humanity (Shue 1996 653). Basic rights are an understanding amongst humanity that I will not transgress against you in this way and you shall not transgress against me in the same way. For example, it's not unreasonable to ask my fellow man not to rape or kill me.

II. HUMAN CLAIM TO BASIC RIGHTS

Before we analyze the basic human rights deserved by each and every citizen we must first understand the importance of rights and our claim to them as human beings. Shue says, " One of the chief purposes of morality in general, and certainly of conception of rights, and basic rights above all, is indeed to provide some minimal protection against other helplessness to those too weak to protect themselves. Basic rights are a shield of the defenseless against at least some of the more devastating and more common of life's threats...(Shue 1996 652)." Basic rights are the very foundation of commodious living because without the protection of basic rights one could never live to their full potential let alone live a comfortable life.

III. BASIC RIGHT TO PHYSICAL SECURITY

Now that we understand what basic rights are and the need for them in a commodious life I will offer an example for one of the most important human rights. In my opinion physical security and the right to be protected from assault of my person or property is the most basic right and the most crucial to living a commodious life. It is easy to see why assault can be detrimental to commodious living. Imagine you're sitting in the perceived safety of your own home watching

television. Right before you head off to bed a masked man invades your home and attacks you before stealing your property. Not only was your night ruined and your rights violated, but now you suffer from physical/psychological pain and your property is gone. No reasonable person would be comfortable with home invasion and therefore couldn't live commodiously under those circumstances.

One important thing to point out in the aforementioned example is that through the violation of your right to physical security many other rights, such as rights to property and privacy, were also violated. Without the protection of physical security no other right can be protected and no material good can be enjoyed because at any time an individual or institution could take them away. It can be said that physical security is a "necessary condition for the exercise of any other right (Shue 1996 655)."

IV. BASIC RIGHT TO MATERIAL GOODS

Commodious living requires more than just protection from assault and security of my property. Commodious living also requires the right to property, at least basic shelter/food/water. Without the aforementioned you wouldn't be living commodiously, or living at all for that matter. The right to these basic material goods is the same as the right to live, much like the right to not be murdered is the right to live. Without the protected right to these material goods it would be impossible to enjoy any basic right and even worse it would push others to violate the basic rights of their fellow man. Could I really blame a starving man for violating my rights to fill his empty belly? So not only are rights to material goods important to commodious living as an individual but it is also an important right in regards to living commodiously as a society. For this reason it should fall on the Commonwealth/society to protect these rights.

V. PARALLELS BETWEEN RIGHTS TO SECURITY AND GOODS

I agree with Shue that, especially in the US, it is sometimes more difficult to grasp the understanding of material goods as rights. But for the same reasons security is a right, if we don't have food or water we cannot exercise or enjoy any other right. The lack of basic material goods have the potential to be just as fatal and hindering to commodious living as assault. In fact, a military tactic that has been around since there have been humans violating other humans rights is "The Siege." To lay siege to a city is to surround the area and deprive the citizens of

any resources in or out of the occupied area. Sooner or later the city will run out of clean water, food, clothes, leading to death or surrender without any assault taking place. Therefore, basic material goods are a crucial right to commodious living.

One of the biggest reasons it's important to recognize access to basic material goods as a human right is because it needs to be protected in the same way other rights are protected. Physical security is a great example of a right that sees a sufficient amount of protection as far as setting up government institutions to ensure that right. In one city there might be three or four police agencies operating in the same jurisdiction to ensure citizen's right to security is not infringed. There are city, county, state, and federal police all working together to establish a secure area in almost every city or town across America.

Unlike the right to physical security, the right to basic material goods aren't being protected in the same way or in some cases at all. An example of this lack of protection for basic rights is the situation of water in the City of Flint. For years the water in Flint was know to be unsafe to use, yet no government institution stepped in to protect citizens right to clean water. Local and national charities provided clean drinking water until eventually, after irreversible damage was done, the Army National Guard was sent in to distribute water.

VI. PROTECTION OF RIGHTS

Another reason why this parallel between the right to physical security and the right to basic material goods is such an important area of discussion is because the common wealth and society need to determine which parts of the government are responsible for protecting rights. When it comes to filling private prisons with young men Flint has no shortage of city, county, state, and federal agents policing the streets. But when it came time to point fingers in regards to who was responsible for pregnant mothers drinking lead polluted water, the federal government looked to the state and the state looked to the county and the county looked to the city and the city looked right back to the state. Just like the responsibility for protecting rights to security fall on every level of government I would argue that same responsibly falls on every level to protect rights to basic materials goods.

An important fact to note when discussing the Flint water crisis is that the water situation is no accident. Much like a masked intruder is responsible for breaking

and entering into your home, someone had to violate your rights by dumping contaminants into the Flint river. For decades factories would dump untreated waste into the river and with loose environmental laws there was nothing to protect the people from eventually ingesting those harmful chemicals and forms of waste. This lack of environmental protection is more detrimental to society than if there was no protection against assault or breaking and entering. Assault might affect two or three people in a neighborhood but when the water is poison the whole city suffers. Furthermore, reports show that the state Department of Environmental Quality wasn't treating the Flint River water with an anti-corrosive agent (Ganim 2016). This type of water treatment is mandatory by federal law. Because the water was corrosive it eroded lead pipes causing the drinking water to become even more poisonous. The lack of enforcement of environmental laws already on the books would be similar to police not defending you from assault in your own home.

VII. CONCLUSION

When looked at from the perspective of a basic right, it seems ridiculous that material goods aren't guaranteed in the same way physical rights are. No person should be subject to assault or robbery much like no citizen should be impacted by contaminated water, especially if it can be easily avoided if protected in the same way as other rights. If material goods are viewed as a right and not a privilege, existing laws would be enforced and negligent parties could be held responsible. A society cannot live commodiously until both physical and material rights are guaranteed and protected to the greatest of our ability.

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Pre-Implantation Genetic Diagnosis: Limiting Personal and Societal Knowledge Through Genetic Discrimination

Mason Majszak

Loyola University Chicago

ABSTRACT

This paper looks at an interesting moral question regarding prenatal genetic diagnosis and the selection of traits. Should prospective parents using assisted reproductive technologies (ART) have a right to use pre-implantation genetic diagnosis (PGD) to select against embryos with known genetic ailments? In light of this question, I will argue against the use of PGD and illustrate the problems of using PGD on both an individual and societal level. I begin by addressing an argument given by Janet Malek and Judith Daar in favor of the use of PGD. The argument claims that society must allow parents to use PGD as an act of beneficence, giving children the best lives possible. I maintain that this argument is insufficient in its analysis of the issue regarding the objective good life. I rather argue for a subjective notion of the good life, which is more in line with our Millian Liberal society. The negative implications of the argument for the use of PGD, is a limiting of living individuals with abnormal genes in terms of their ability to potentially gain self-knowledge. In light of this, I provide reasoning to show how the use of PGD is a form of genetic discrimination because of the disregard of each embryo's claim to life. This discrimination will then be shown to cause harm to society due to the limiting nature discrimination has on the marketplace of ideas. A counter argument, given by Jeff McMahan, will attempt to show the unwanted consequences of accepting the genetic discrimination argument. I uphold my argument's validity and show how McMahan is misguided in his reasoning regarding the implications of the discrimination argument. Ultimately, I will conclude that prospective parents using ART should not be permitted to select against embryos with known genetic ailments because of the negative effects on self-knowledge and the limits this type of practice will impart on the market place of ideas in our society.

KEYWORDS

Bioethics, Epistemology, Genetic Ethics, Subjective Good Life, Disability Rights, Liberty, Discrimination, Beneficence, Self-Knowledge, Reproductive Rights

INTRODUCTION

In the fall of 2017 Frank Stephens spoke before a congressional hearing to discuss funding for Down syndrome research and stated,

Sadly, across the world, a notion is being sold that maybe we don't need research concerning Down syndrome. Some people say prenatal screens will identify Down syndrome in the womb and those pregnancies will just be terminated. It's hard for me to sit here and say those words. I completely understand that the people pushing this particular 'final solution' are saying that people like me should not exist. That view is deeply prejudice by an outdated idea of life with Down syndrome. (C-SPAN 2017)

During this hearing Mr. Stephens brought up points regarding the societal importance of individuals with Down syndrome, while also stating "I am a man with Down syndrome and my life is worth living" (C-SPAN 2017).

Mr. Stephens's testimony brings about an interesting moral question regarding prenatal genetic diagnosis and the selection of traits. Should prospective parents using assisted reproductive technologies (ART) have a right to use pre-implantation genetic diagnosis (PGD) to select against embryos with known genetic ailments? This paper will analyze this question, with a specific focus on conditions such as Down syndrome, and illustrate the problems of using PGD on both a personal and societal level. I begin by discussing the background terminology required for understanding this issue so as to reduce any confusion caused by the use of these medical terms. I then address an argument in favor of the use of PGD given by Janet Malek and Judith Daar. The argument will claim that society must allow parents to use PGD as an act of beneficence, giving children the best life possible. I maintain that this argument is flawed in its analysis of a plausible definition of the good life for individuals with genetically different backgrounds. My response to the argument will further illustrate how the flawed analysis leads to negative consequences for specific individuals who currently live in society. Ultimately, I argue that the byproduct of Malek and Daar's argument is a limiting of living individuals, with abnormal genes, in terms of their ability to attain self-knowledge or knowledge of their personal identity.

In light of this, I provide reasoning to show how the use of PGD is a form of genetic discrimination because of the disregard of each embryo's claim to life.

This discrimination will then be shown to cause harm to society due to the limiting nature discrimination has on the marketplace of ideas. A counter argument, given by Jeff McMahan, will attempt to show the unwanted consequences of accepting the genetic discrimination argument. I uphold my argument's validity and show how McMahan is misguided in his reasoning regarding the implications of the discrimination argument. Ultimately, I conclude that prospective parents using ART should not be permitted to select against embryos with known genetic ailments because of the negative effects on self-knowledge and the limits this type of practice will impart on the market place of ideas in our society.

BACKGROUND TERMINOLOGY

First, we must be clear on the terminology required for understanding this issue due to the use of multiple technical terms. Assisted reproductive technology (ART) procedures include "all fertility treatments in which both eggs and embryos are handled" (CDC 2017). This type of treatment includes the removal of egg cells to be combined with sperm cells in a laboratory, which will ultimately be returned to the individual or can be donated to another woman. This means that ART does not include artificial insemination where only sperm is handled. Pre-implantation genetic diagnosis (PGD) is a "procedure used prior to implantation to help identify genetic defects [and traits] within embryos" and is performed using "egg retrieval and fertilization in a laboratory", a retrieval process also referred to as ART (APA 2017). While PGD can test for hundreds of genetic diseases, some of the most common are "single gene defects such as Cystic Fibrosis, or chromosomal abnormalities like Down syndrome"(UCONN 2017). By allowing the testing of embryos for genetic abnormalities this allows prospective parents to select against embryos that have genetic abnormalities. This results in the physician not implanting the embryos with known genetic abnormalities into the potential mother. Selecting against certain characteristics is historically less controversial than selecting for a specific trait in a child. I argue however that in spite of any liberal interest or right to use PGD for selecting against certain traits, the resulting harms to currently disabled people and society in general supply sufficient reasons to limit the use of this technology.

THE RIGHT TO GIVE CHILDREN THE BEST LIFE

Given the technical terms outlined above, I will illustrate an argument in favor of allowing parents the liberty to select against embryos with genetic abnormalities. The first argument is an appeal to acts of beneficence, or “forms of action intended to benefit or promote the good of other persons” (Beauchamp 2008). In other words beneficent acts are those that do good for an individual where the individual receiving the good is not the individual performing the act. From this definition it is then argued that the selection of traits based on PGD is an act of beneficence meaning the act is not only something that a parent can do but is also something they ought to do. The distinction being that an “ought to do” is a moral claim, thus it would be morally permissible for the individual to do that action and morally wrong for the person not to do that action given the option.

The argument for allowing parents to select against embryos with genetic defects given by Janet Malek and Judith Daar would be as follows. Parents have the duty to give their children the best possible life. Thus they ought to use PGD because by selecting against embryos with genetic defects the child they have will be able to live a life better than that would have been lived by one with a genetic defect. In other words, due to beneficence and given the option to improve their future child’s life, a parent ought to do so. The use of PGD as a means to achieve the best life of a child would be to “reduce suffering overall” for the potential child (Malek and Daar 2012, 5). From this we can see that the argument stems from a moral obligation to give children the best possible life, in turn avoiding suffering.

In light of this, it must then be questioned, what does it mean for a person to lead the best life or rather what it means to have a high level of well being? Janet Malek and Judith Daar argue, “under any plausible definition of this concept, a life without a disabling genetic condition is likely to be lived at a higher level of ‘well-being’ than one with such a condition” (Malek and Daar 2012, 5). In other words, according to Malek and Daar, people who are not disabled lead a life with a higher level of well-being than a that life led by a disabled person. In sum, parents using ART ought to use PGD to select against embryos with genetic abnormalities as this is part of their duty to give their child the best possible life.

Given the argument described above, I maintain that the argument is flawed and will argue against the notion that a person with a non-normal genetic background is not able to lead a good life. One way in which the argument is

flawed is due to its appeal to the notion of “any plausible definition” when trying to decide what represents the good life. The phrase “any plausible definition”, regarding what a good life represents, implies that the good life of for an individual is objectively knowable by any individual in a society. This notion can be taken further to say that it is then up to the society to decide what is the good life because society dictates what is plausible. But this is not how the notion of a good life works in a Millian Liberal society, like our own society. The good life is a subjective notion that is decided by the individual rather than constructed by society. This subjective good life means that the individual creates their own idea of what it means to lead a good life based on their individual experiences of the world.

The notion of creating one’s own best life can be illustrated using an example. In the example a person is born with a different genetic background, such as Down syndrome. This individual assesses his or her well being based on a life lived with Down syndrome. Contrast this with a second person who is born with a classically “normal” genetic background. This individual will assess their well being based on living with the classic genetic background. These individuals assess their individual lives based on the individual life they are living, one with Down syndrome and the other with a classic genetic background. Individuals of classic backgrounds cannot accurately assess what it would mean to live the best possible life of a person with a different genetic background because the individual does not have access to the relevant experiences of the life lived with Down syndrome. In other words, we are limited by our own experiences of the life we lived because we do not have access to the experiences of another.

In light of this, when we are to assess the good life of a person with a genetically different background we are not able to do so based on our conception of the good life. We must rather ask the individual person with said genetic background about their notion of their own best life because they are the only individual with access to the relevant experiences necessary to create their subjective notion of a good life. When we take the testimony of Frank Stephens, shown earlier, he is clearly living his best life, as shown when he states outright, “my life is worth living” (C-SPAN 2017). This illustrates that individuals of genetically different backgrounds can not only create a notion of their own best life but can then go on to fulfill this notion and lead their best life. The notion of the subjective good life shows that the argument given by Malek and Daar is not concerned with

people leading the good life for that specific individual. Rather the argument is concerned with people leading a life that conforms to societies understanding of the best life, the life described by a person of the classic genetic background.

A second problem with Malek and Daar's argument is that the line of reasoning used has damaging implications for those individuals currently living with a genetically different background in our society. The creation of a social standard of a good life or the objective good life is at the center of the damaging for these individuals. The standard is damaging because of the stigma it creates against disabled individuals and their potential quality of life. This stigma being that disabled people lead less fulfilling lives than non-disabled people, a notion that is hurtful to all individuals who society considers disabled. The stigma facilitates individuals in our society seeing genetically abnormal people for only one part of their personal identity, the fact that they are different than the rest of society. The individuals with a genetically different background are then treated as if the abnormality of their genetic background defines who they are as an individual.

When an individual is only viewed as abnormal it can cause a potential limiting in the individuals ability to acquire self-knowledge and personal understanding. When society defines you only by one aspect of your personhood you may begin to focus only on that one aspect of your idea of self. This results in the individual seeing this aspect as the only feature that defines them as a person because it is the only characteristic that society recognizes. From this a person begins to have a degraded understanding of their self-worth because the only aspect of themselves they identify with is an abnormality, which society tells them is not valuable and should be selected against. This results in these individuals not only feeling that society doesn't care about their existence but also limits their understanding of themselves as complex individuals outside of their genetic background. The limiting of knowledge then results in the individual not being able to understand who they are as a person and how they should live their best life. The reasoning put forth by Malek and Daar tells individuals with a different genetic background that their life is not worth living, that they should be pitied and it would have been better if someone else were born instead of them. In light of this, the use of an argument, like Malek and Daar's, limits those individuals who are currently living by not allowing the individuals to reach a full understanding of who they are as a person and the positive impact they can have on society.

THE GENETIC DISCRIMINATION ARGUMENT

A second argument against PGD arises from the use of this technology as being detrimental to society as a whole. The use of PGD can be detrimental to society because it can fuel the systematic discrimination of individuals with genetic ailments, pushing these individuals to the fringes of society. The genetic discrimination argument would be as follows, by allowing parents to select against embryos with known genetic defects we are discriminating against other fertilized embryos, which have an equal claim to life as the embryos without any genetic defects. An equal claim to life means that if two things are equal in all relative factors then they each have the same claim to become actualized and thus begin the process of development in the womb.

I have previously argued that those individuals with a genetic abnormality have the same ability to live a good life as a person without a genetic abnormality. Given my reasoning, these two are equal based on the relevant factors of ability to lead a good life. From this we can say that any selection of one embryo over another would then be considered discrimination because the two embryos are equal and thus have the same claim to life. In other words, by actualizing one embryo over another you are saying that this specific embryo has a greater claim to life than the other embryos. By using a selection criterion that is based on an absence of genetic abnormalities you are discriminating against those embryos with the abnormalities even when they all have the same claim to life.

This type of discrimination has negative implications when discussing the marketplace of ideas in our society. This discrimination causes the reduction of the number of individuals with the genetic abnormalities. This fuels the type of systematic discrimination that is already happening in our society, where individuals that society views as different are not given a voice. By not allowing people of different genetic backgrounds have a voice in society or even be actualized we are limiting the understanding of different ways individuals can live their lives. This goes directly against our understanding of a good liberal society, like our Millian based society. The reduction described above can cause a societal loss of interactions between individuals, resulting in less communication between different people. This loss of communication will then cause a loss of knowledge potential on the part of those people living in society. This potential knowledge coming from the market place of ideas, a theoretical location were ideas a shared and available to all individuals in the society. The loss of potential knowledge in

the marketplace is due to the marketplace being fueled by difference. In other words, a lack of interaction or observing a different way of life limits the knowledge potential stored in the marketplace. This loss of knowledge potential limits the future of the society and can result in a society of stagnation due to all individuals leading similar lives resulting from less marketplace diversity.

While we can limit the use of PGD using an appeal to the marketplace of ideas we should not limit the use of this technology completely. I maintain that the use of selecting embryos based on PGD limits the availability of different tastes and pursuits in the marketplace of ideas and this is why this type of discrimination should not be used. However, if the embryos were in fact not equal we could potentially use the PGD as a way to limit, without any harmful repercussions on the marketplace. If one embryo was found to have the genetic markers for a specific very painful disease that limited the ability of that potential person to live their life, then we could actively select against that embryo. An example would be Lesch-Nyhan Syndrome, which can be detected with PGD. Lesch-Nyhan Syndrome is an alarming disease that causes "involuntary muscle movements, jerking movements and flailing of the limbs" (U.S. Library of Medicine 2017). This behavior worsens and usually involves self-mutilation "including biting and head banging" (U.S. Library of Medicine 2017). Individuals with Lesch-Nyhan Syndrome often need to be forcibly restrained so as not to cause themselves extreme injury, severe lip biting can still occur. These individuals also live a very short life often not reaching the age of ten years old (U.S. Department of Health and Human Services). The short life lived with this genetic disease is incredibly painful, marked with constant self-torture and low cognitive efficiency.

Selecting agents those embryos with Lesch-Nyhan Syndrome would not be an act of discrimination because the relevant factors of equality, ability to lead a good life, are shown to not be equal do the incredible pain this person with the disease would need to go through every day of their life. Due to the immense pain the individuals would not be able to partake in society and contribute to the marketplace of ideas. Their painful disease would not allow them to actively go out into the world and express the way they live their life and experience anything outside of pain. This ultimately shows that in very specific circumstances we can use PGD to select against some genetic disorders but only when the disorders cause unlivable pain and result in the individual inability to make a meaningful addition to the knowledge potential in the marketplace of ideas.

COUNTER – THE IMPLICATIONS OF THE DISCRIMINATION ARGUMENT

Now, I will analyze a counter argument as a way to better understand any unintended implications of the argument I have constructed. I will be utilizing an argument put forth by Jeff McMahan as he describes the implications of approving the claim of genetic discrimination, an argument that is similar to the claim I have put forth in this paper. McMahan argues that those who agree that the practice of prenatal screening is genetic discrimination must then also approve the permissibility of causing oneself to have a disabled rather than a non-disabled child. His reasoning is as follows, “most of us think that if it would be wrong to cause an already born child to become disabled, and if it would be wrong to cause a future child to be disabled through the infliction of prenatal injury, it should also be wrong to cause a disabled child to exist rather than a child without a disability” (McMahan 2005, 130). In other words, McMahan is claiming that if we believe it is wrong to cause a child to be disabled, which he believes it is wrong, then it should also be wrong to have a disabled child rather than a non-disabled child, given the option.

There are two problems with McMahan claim regarding the implications classifying this issue as genetic discrimination. The first is with the appeal to “most of us”; this is a claim that due to the majority of individuals viewing an instance as valid then the instance must be true. This reasoning is flawed because of an appeal to the majority; a majority opinion does not necessarily mean that opinion is correct. If we as a society followed this reasoning, we would still believe that the sun revolved around the Earth. Due to the Copernican revolution however we have seen that the majority opinion of a geocentric, earth centered, solar system has shifted to a heliocentric, sun centered, solar system. If the majority view were correct then we could have never made this switch and would continue to have an incorrect view of the solar system.

The second issue in McMahan’s claim has to do with the notion of causation. There is an essential difference between causing oneself to have a disabled child through some action and simply having a disabled child by genetic chance. The difference is that an action is done to create a new circumstance where the embryo is altered resulting in a new individual. If a person were to have a child that had a genetic abnormality then that child would be the potential child that started as an embryo, but if we take an embryo and do something to it to change the future of the potential person, then we are changing this individual.

This difference is significant because in PGD the embryos already have different genetic backgrounds and thus parents are not in any way causing the child to be harmed. The embryo would develop exactly the same way as any other embryo regardless of if there were a genetic abnormality present.

McMahan recognizes that there may be individuals who accept the implications of classifying this issue as discrimination. He then attempts to show that the objections to the causation argument are underlined by “the view that it can be worse to be disabled than not to be, which seems unobjectionable” and that this too should be reasoning enough to not consider this to be discrimination (McMahan 2005, 131). He makes this claim to show that we as individuals have a problem with causing someone to become disabled because it will make the individuals life more difficult. He then reasons that this means there is a fundamental and distinct difference in the two potential people, disabled and nondisabled. If we accept this claim that the two individuals are fundamentally differently then, McMahan argues, this would show that the two individuals are not fundamentally equal because they are distinct. In other words, there would be no discrimination involved in selecting against embryos with genetic defects because the two embryos are not equal. Discrimination requires the two embryos to be fundamentally equal but not treated equal in reality. In this case, his causation argument shows that we see a fundamental difference in the embryos.

Now, let us examine this claim that there is a fundamental difference between a disabled and a non-disabled person, resulting in the perception that it is worse to be disabled and thus not lead a life equal to a non-disabled person. I would agree that to cause someone to become disabled would harm this person in our current western society, but being disabled does not make a person inherently worse off or different than a nondisabled person. While these individuals are distinct in identity and personal traits, they are not distinct in any way that differentiates them from being a person and their ability to lead a good life. In other words, when considering the relevant factors for equality these two embryos are equal. Ultimately, this means that the underlying difference in causation he describes is not fueled by a fundamental difference between the two embryos but is rather due to how society values the embryos.

The reason why it is currently more difficult to be a disabled person in society is because our society was built by non-disabled people for non-disabled people. This is the same reason why it is harder to be black, a women or any minority in our

society, it was created by white men for white men. If we had a society that valued the input and existence of genetically different individuals, then we would have a society that was more open to caring for the specific needs of those individuals. This shows that being disabled is not inherently more difficult; it is our society that makes it much harder for disabled individuals than those who society considers to be of a normal genetic background.

From this we can see that there is a fundamental societal change that must occur. We must recognize the prejudices we have in our social structure and do everything in our power to remediate these inaccuracies and systemic discrimination. We should not maintain the status quo of seeing people with different genetic backgrounds as an "other"; this starts with allowing these individuals the ability to be actualized. With this step we can begin to change the negative connotation around being disabled and begin to converse and share ideas to allow society to no longer benefit only one gender, of one race, of one genetic background, but to rather be a society for all individuals. It will be at this moment when humanity takes its next step into the future with all individuals on equal ground.

In light of this, it is clear that the use of PGD should not be a technology used by the majority of people in society but as I previously articulated it is a technology that should not be prohibited entirely. I maintain that this technology should not be encouraged because of the negative personal and social implications. The distinction of not being encouraged in society is a difference that is note worth and should be explained in greater detail. By not encouraging the use of PGD, as a way to select against non-painful diseases, it would entail that publicly funded hospitals would not be able to perform this type of procedure. By not having it be done at publicly funded hospitals means that tax payer funds are not being used to facilitate this discrimination. This would dispel the concern of systematic discrimination because the use of the technology would not be condoned or funded by the government. It would however allow for private hospitals to perform this type of procedure and would result in the wealthy having access to this option. The private availability of specific expensive procedures is not uncommon as wealth in our current society gives increased access to many things the average or below average individual does not have access to. Thus allowing those wealthy enough to have this procedure can exercise their liberty to do so. This doesn't however give a good enough reason to support or fund technologies

that we wish the wealthy were not performing. Given this, it is clear to see that there is good and sufficient reason to partially prohibit and not fund the use of PGD for selecting against embryos with genetic abnormalities because of the negative implications on living individual's ability to accurately create a personal identity and for the negative implications on our societies marketplace of ideas.

CONCLUSION

In this paper I have illustrated an argument given by Malek and Daar in favor of selecting against embryos with genetic defects, with the argument originating from beneficence and an appeal to autonomy. From this I showed how the argument is insufficient in its analysis of the good life and in turn propagates inaccurate and hurtful stigmas against individuals of different genetic backgrounds. This type of propagation was shown to lead to the loss of self-knowledge for the individuals with genetic abnormalities. I then described my argument, that allowing parents to select against embryos with genetic abnormalities is a form of genetic discrimination. I showed that based on the relevant criteria of leading a good life each embryo had the same claim to life. This discrimination was then shown to limit the knowledge potential of the society, which in turn shows the negative implications of using PGD. I showed that there are some applications of PGD that should be used; Lesch-Nyhan Syndrome was then used as an example. The use of PGD was limited to be used only when the genetic abnormality brings about a physically painful or unbearable life for the child because the embryos were then considered to not be equal. A counter argument given by Jeff McMahan states that there are implications to the discrimination argument that seems immoral. I then illustrated how this counterargument was misguided and showed that rather than not allowing these individuals with genetic abnormalities to be actualized, we should change our social structure to be more accommodating for the needs of all individuals. While there are some instances where PGD can be used, I ultimately concluded that prospective parents using ART should not be permitted to select against embryos with known genetic ailments because of the unjust way it classifies individuals resulting in the loss of self-knowledge and the limits this type of discrimination forces upon the market place of ideas, which in turn limits social knowledge.

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