

Philosophical Medical Ethics

“It’s all too subjective”: scepticism about the possibility or use of philosophical medical ethics

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In my last article I considered arguments that medicine did not need moral philosophy. Here I consider several common sceptical arguments suggesting that useful discussion about medical ethics is not even possible. Several of these arguments are variants of the claim in my title—that, unlike science, ethics of any ilk is subjective, a mere matter of opinion in which anyone’s claims are as good as another’s (“These are my ethics; what are yours?”).

Perhaps one of the commonest variants is what I shall dub the argument from disagreement. According to this, although we all agree about objective facts—the sort of things that scientists are concerned with—we disagree radically across the whole spectrum of moral issues and such disagreements are irresolvable.

There are several sorts of counterargument to this position. The first shows that objective scientific claims are often themselves subject to radical disagreement, even within the scientific community. The second (which I shall not consider further as it seems obviously true) points out that disagreement in itself sheds no light on: (1) whether the disputed claim is true or false; (2) whether it is even possible for the claim to be true or false; or (3) whether it is possible to know if the claim is true or false. The third sort of counterargument is that in fact a wide measure of agreement exists about basic moral claims.

Disagreements in science and ethics

It is important, as the philosopher Renford Bambrough pointed out,¹ to make sure that like is being compared with like when looking at the disagreements of ethics and science. Usually people offering the argument from disagreement compare a complex example in ethics with a simple example in science. Non-treatment of severely handicapped infants is, as I hope I have shown in my first article, a complex moral issue; thus it would not be legitimate to compare it with some straightforward scientific claim—say, the number of chromosomes characteristically present in human cells—and point to the widespread agreement about that. Instead, an appropriate comparison might be with scientific claims about the aetiology of cancers, the mechanisms of genetic expression, or perhaps the origin of the universe.

There are a host of radical disagreements throughout the sciences that are either explicitly admitted to result from ignorance^{2,3} or are characterised by the sorts of disputed claims and counterclaims, supported by arguments and counterarguments, that are typical of radical moral disagreements. If such ignorance and radical disagreement do not undermine the possibility, use, or objectivity of science why should they do so for ethics?

It can, however, be argued that, although radical disagreement

may exist about complex scientific claims, it does not exist about simple scientific claims but does about all moral claims. Well, consider the claims that material objects exist and that their properties are independent of our perception of them. If these cannot be classed as simple scientific claims what can? Yet, in addition to a long line of philosophers (of whom Berkeley is the best known⁴) who have contested them and given apparently cogent arguments for their beliefs, a contemporary theoretical physicist of repute has cast reasoned doubt on the existence of material objects, at least in anything like the form in which they appear to exist,⁵ and has argued that many of our commonsense, simple beliefs about time and space are mistaken.

Other, less thoughtful, less reasoned forms of radical disagreement about widely accepted scientific claims also exist—for example, the opinions of the flat earthers about the shape of the earth. If the existence of disagreement in this case need not lead to scepticism or relativism about the shape of the earth why should disagreement about ethical issues lead to moral scepticism or relativism?

Moral agreement

To return to the third counterargument, is it true that radical disagreement exists about all ethical claims? Ignoring as irrelevant the fact that some people will always be found to disagree about any claim of any sort, ethical or otherwise, is there not in fact widespread agreement about the claim that it is wrong to inflict pain or harm or suffering on other people without good reason? That it is wrong to kill people without good reason? That it is wrong to deprive people of their liberty without good reason? That it is wrong to coerce people to do things against their will without good reason? The list could be extended.

I suspect that acceptance of such moral principles is widespread, not just in our society but in most societies (see various entries under anthropology in Reich’s *Encyclopedia of Bioethics*⁶ and Edel and Edel’s *Anthropology and Ethics*⁷). Of course I have phrased the moral claims carefully, for it is perfectly clear that without the crucial rider “without good reason” the moral principles offered would not stand a chance of widespread let alone near universal acceptance. At any rate, the claim that radical disagreement exists about all moral claims seems highly implausible and, given the “without good reason” clause, the claim for widespread agreement about many moral principles seems at least sufficiently plausible to be worthy of appropriate empirical investigation however variable are the actual practices that acceptance of this (obviously by no means adequate or complete) set of moral principles may be claimed to require. It may be said, however, that it is precisely those variable practices that give the lie to my claim of widespread agreement about moral principles.

Bishop Butler somewhere wrote that it is in what people pretend that true morality may be discovered. When Hitler set out to wipe out the Jews, the Gypsies, and the mentally disordered he “justified” his actions on two moral grounds, the first being the crude

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utilitarian claim that the world would be better off without these groups, the second that the normal moral obligations preventing us from wiping each other out did not apply to these groups because they were subhuman, beyond the pale of our normal morality, and legitimately regarded as lower animals who might be destroyed for the benefit of those with full moral rights, the *Herrenvolk*. My point is that even Hitler and the Nazis, although they disagreed with most people about the moral acceptability of particular actions, accepted the need to give "good reason" for actions that would otherwise contravene moral principles to which they implicitly subscribed.

In general, I suspect that most people (with the probable exception of certain sorts of psychopath)—even the most evil people—would accept the moral principles I have outlined above. It is in their interpretation and application to practical problems that disagreement tends to arise. That is precisely, however, a part of what moral philosophy is about. Thus I conclude that the argument from moral disagreement fails to show that moral philosophy is either impossible or useless.

Radical moral sceptics

Sometimes one meets radical moral sceptics (especially in first year ethics classes) who purport to reject all moral principles. I do not believe that there is any satisfactory method of reasoning available to combat (philosophically skilful) radical moral scepticism (though as soon as the tyro radical sceptic indicates any substantive moral position himself—moral outrage, for example, at his teacher's proposal that all blacks or Jews or people from his part of the world should be excluded from medical schools—his bluff or confusion has been called, and moral discussion with him can begin). Furthermore, it is often remarkable that self-professed radical moral sceptics who reject "commonsense" basic moral claims of the sort I have sketched above are perfectly happy to accept commonsense basic scientific claims. Before accepting their position we can reasonably request explanations of why if they accept the commonsense claims of science they reject the commonsense claims of morality; and, conversely, why if they reject the commonsense claims of morality they accept those of science.

Doctors' scepticism

Medicine being essentially a moral enterprise that aims to do good for others, doctors are almost never radical moral sceptics. Doctors' scepticism about ethics tends to centre on the beliefs discussed above, that ethics is a personal or subjective matter, that one doctor's ethics is as good as another's, and that there is no rational way to resolve moral disagreements arising in medical practice except perhaps by agreeing to differ.

This belief is too pessimistic. Although I am not one of those who believes that moral disagreement can in principle be completely eliminated, once moral dialogue has become possible as the result of some element of moral agreement (it may be no more than an agreement that it is a good thing to try to understand the opposed moral positions) considerable progress towards resolution can often be made simply by the use of careful analysis.

Such analysis may show that some moral disagreements are not disagreements at all; instead, usually because of the use of ambiguous terminology, the disputants are making claims that they mistakenly think are in conflict. (Two doctors may strongly disagree about the moral acceptability of "passive euthanasia" but on analysis realise that they both "let patients die" and conversely both "strive officiously to keep alive" in similar sorts of cases and for the same sorts of reasons.)

Sometimes the putative moral disagreement turns out to be disagreement about the non-moral facts of the case; for example, although some doctors disagree in principle with letting handicapped

infants die, others who do not may in a particular case be outraged because they disagree with the assessment of the degree of handicap. They express their outrage, however, as if there were no moral meeting point between them and doctors who let handicapped infants die.

I suspect that in fact almost all doctors let or would let some handicapped infants die—consider anencephalics and other "monsters." The apparently clear cut and radical differences in principle between opponents over this issue usually turn out to be differences about what degree of handicap justifies such behaviour and why and whether in a particular case the infant concerned has the relevant degree of handicap. Once the disputants realise this the impasse can often be unblocked and fruitful moral discussion pursued.

Analysis of the logical validity of the actual arguments used in cases of moral disagreement is also potentially fruitful. In their scientific discussions doctors rigorously eschew logically slipshod reasoning; yet it is remarkable how often logically fallacious reasoning underpins a medicomoral stance. But one example: one often hears the argument that as nature aborts a large proportion of chromosomally defective fetuses abortion of defective fetuses is morally acceptable. Of course the conclusion simply does not follow logically from the premise, and as soon as proponents of this argument are asked to supply additional premises to make the argument logically valid (for example, that everything that occurs in nature is morally acceptable) its weakness becomes apparent to its perpetrators.

A further potentially fruitful method of attempting to resolve moral disagreements is to try to confirm or refute a particular moral claim by considering its implications for other situations in which it should apply if the person making the claim is to be consistent. If, for example, it is morally acceptable to let newborn infants with Down's syndrome who are rejected by their parents die it should (unless other moral premises are to be added) be morally acceptable to let older children and also adults with Down's syndrome die if they are rejected by their parents.

Once again such analysis leads the perpetrator of the argument to seek additional premises to make his argument consistent with his other moral beliefs; if he cannot do so, if the necessary additional premise or premises would irresolubly conflict with those other moral beliefs, he may amend the second or reject the first. He cannot, however, if he accepts the need for moral consistency, maintain his previous position.

Conclusion

In conclusion, common arguments purporting to show that moral claims are essentially different from scientific claims in that scientific claims are objective and confirmable or refutable while moral claims are subjective, unconfirmable, and irrefutable do not stand up to criticism, and the same goes for several other claims purporting to show that moral differences are incapable of resolution. Scientific and moral reasoning are not as different as they are so often assumed to be.

This article relies heavily on Renford Bambrough's excellent book.

References

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