

CONTEMPORARY
ISSUES IN
BIOETHICS

FIFTH EDITION



Tom L. Beauchamp

LeRoy Walters

CONTEMPORARY ISSUES IN BIOETHICS

FIFTH EDITION

Edited by

Tom L. Beauchamp & LeRoy Walters

Kennedy Institute of Ethics and Department of Philosophy

Georgetown University



Wadsworth Publishing Company

I(T)P® An International Thomson Publishing Company

Belmont, CA • Albany, NY • Boston • Cincinnati • Detroit • Johannesburg • London • Madrid
Melbourne • Mexico City • New York • Pacific Grove, CA • Scottsdale, AZ • Singapore • Tokyo • Toronto

Philosophy Editor: Peter Adams
Assistant Editor: Kerri Abdinoor
Senior Editorial Assistant: Mindy Newfarmer
Marketing Manager: Dave Garrison
Print Buyer: Karen Hunt
Permissions Editor: Susan Walters

Production: Matrix Productions Inc.
Copy Editor: Cheryl Smith
Cover Design: Carole Lawson
Compositor: ColorType
Printer: R. R. Donnelley & Sons, Harrisonburg

COPYRIGHT © 1999 by Wadsworth Publishing Company
A Division of International Thomson Publishing Inc.

ITP The ITP logo is a registered trademark under license.

Printed in the United States of America
2 3 4 5 6 7 8 9 10

For more information, contact Wadsworth Publishing Company, 10 Davis Drive, Belmont, CA 94002, or electronically at <http://www.wadsworth.com>

International Thomson Publishing Europe
Berkshire House
168-173 High Holborn
London, WC1V 7AA, United Kingdom

Nelson ITP, Australia
102 Dodds Street
South Melbourne
Victoria 3205 Australia

Nelson Canada
1120 Birchmount Road
Scarborough, Ontario
Canada M1K 5G4

International Thomson Publishing Southern Africa
Building 18, Constantia Square
138 Sixteenth Road, P.O. Box 2459
Halfway House, 1685 South Africa

International Thomson Editores
Seneca, 53
Colonia Polanco
11560 México D. F. México

International Thomson Publishing Asia
60 Albert Street #15-01
Albert Complex
Singapore 189969

International Thomson Publishing Japan
Hirakawa-cho Kyowa Building, 3F
2-2-1 Hirakawa-cho, Chiyoda-ku
Tokyo 102, Japan

All rights reserved. No part of this work covered by the copyright hereon may be reproduced or used in any form or by any means—graphic, electronic, or mechanical, including photocopying, recording, taping, or information storage and retrieval systems—without the written permission of the publisher.

Library of Congress Cataloging-in-Publication Data

Contemporary issues in bioethics / [edited by] Tom L. Beauchamp & LeRoy Walters. — 5th ed.

p. cm.

Includes bibliographical references.

ISBN 0-534-50476-0

1. Medical ethics. 2. Bioethics. I. Beauchamp, Tom L.

II. Walters, LeRoy.

R724.C67 1999

174'.2—dc21

98-48339



This book is printed on acid-free, recycled paper.

www.wadsworth.com

wadsworth.com is the World Wide Web site for Wadsworth Publishing Company and is your direct source to dozens of online resources.

At *wadsworth.com* you can find out about supplements, demonstration software, and student resources. You can also send e-mail to many of our authors and preview new publications and exciting new technologies.

wadsworth.com

Changing the way the world learns®

P R E F A C E

This fifth edition of *Contemporary Issues in Bioethics* differs significantly from the fourth and earlier editions. It attempts to reflect current changes in the bioethics field and assumes a more global perspective. For example, it incorporates new materials on ethical dilemmas arising in Africa, Asia, and Europe, as well as in Canada and the United States. Seventy-five of the 124 selections in this edition are new, when compared with the selections in the fourth edition. This edition also includes a new chapter on research ethics, involving human and animal subjects, and combines the two death-and-dying chapters of the fourth edition into a single chapter.

In each chapter we have tried to give students and faculty members a sense of the cutting-edge of contemporary ethical discussion and debate. For example, the chapter on the right to die includes excerpts from the precedent-setting Supreme Court decisions on physician-assisted suicide from 1997. Chapter 6, on access to health care, discusses managed care for the first time in the editions of this anthology. The research chapter includes several striking historical examples of the abuse of human subjects—in the Tuskegee syphilis study, in Nazi Germany, in the recently-revealed radiation experiments in the United States, and in China under Japanese occupation. Chapter 9, on reproduction, considers cloning. In the final chapter on AIDS, questions of newborn screening and research in third-world contexts both receive substantial attention.

This book has again been a collaborative effort from start to finish. Tom Beauchamp has assumed primary responsibility for Chapters 1 and 3–6. LeRoy Walters took the lead on Chapters 2 and 7–10. However, we have shared a common goal—to identify and reprint a spectrum of views on each of our topics—views advanced by some of the most articulate and widely respected spokespersons in the field of bioethics. In this effort we have both been ably assisted by Padma Shah, our research assistant, who was tireless in locating and evaluating candidate documents from an almost-overwhelming flood of literature. In addition, Tom Beauchamp received valuable assistance from Sanyin Siang in the accumulation of materials for four chapters. Padma and Sanyin also provided sage advice that helped us make our selections more pertinent and the introductions more readable for students. Sue Walters and Barbara Bost helped with proofreading, and seven students also collaborated in the preparation of page proofs: April Carnahan, Michael Hammer, Erika Ann Jeschke, Philip LeVine, Sarah Moesker, Julia Jacoby, and Rhett Millsaps.

We have again been fortunate to be assisted by the finest library and information-retrieval colleagues in the world. In particular, we acknowledge the exceptional work of Doris Goldstein, Director of Library and Information Services, and her colleagues, Frances Abramson, Laura Bishop, Nichelle Cherry, Martina Darragh, Lucinda Huttlinger, Joy Kahn, Pat McCarrick, Patricia Martin, Hannelore Ninomiya, Anita Nolen, Cecily Orr, Clementine Pellegrino, Susan Poland, Kathleen Reynolds, and Jamey Trainer. We also thank all of our faculty colleagues at the Kennedy Institute and the Philosophy Department for their constant intellectual stimulation.

Moheba Hanif has accompanied us in the work on this edition from the beginning of the project, and it is she alone who was responsible for securing permission to reprint the selections that we include in this edition, as well as for final preparation of several features of the manuscript.

At Wadsworth Publishing Company, we are grateful for the expert advice of Peter Adams, the Philosophy Editor. At Matrix Productions, Merrill Peterson has efficiently overseen the

copyediting process and the conversion of our text into pages. At ColorType, multiple typesetters with whom we have not communicated directly have carefully keyed thousand of characters. We are grateful to the reviewers of the previous edition: Donald Becker, University of Texas, Austin; Candace C. Gauthier, University of North Carolina, Wilmington; Richard T. Hull, SUNY, Buffalo; Douglas C. Long, University of North Carolina, Chapel Hill; Lynn Lumbrezer, University of Toledo; and Lynn Pasquerella, University of Rhode Island. And we also wish to thank the reviewers of this edition: Donald Becker, University of Texas, Austin; Peter Horn, Capital University; Terrence McConnell, University of North Carolina, Greensboro; and Lynn Pasquerella, University of Rhode Island.

Finally, we want to acknowledge the patience and support of our spouses, Ruth and Sue, and of our children, Karine and Zack, and David and Robert, throughout the always-arduous process of reading, selecting, editing, introducing, and proofreading.

We hope that this book will stimulate discussion in academic settings and contribute to the development of more enlightened public policies on these important biomedical topics.

November 1998
Tom L. Beauchamp, LeRoy Walters
Kennedy Institute of Ethics
and Department of Philosophy
Georgetown University

CONTENTS

Preface xi

PART I Introduction to Ethics

CHAPTER 1: ETHICAL THEORY AND BIOETHICS 1

Fundamental Problems	1
<i>The Study of Morality</i>	1
<i>Moral Dilemmas and Disagreements</i>	3
<i>The Problem of Relativism</i>	6
<i>Moral Justification</i>	9
Types of Ethical Theory	10
<i>Utilitarian Theories</i>	10
<i>Kantian Theories</i>	13
<i>Contemporary Challenges to the Traditional Theories</i>	15
<i>Virtue Ethics</i>	15
<i>The Ethics of Care</i>	16
<i>Casuistry</i>	17
Ethical Principles	18
<i>Respect for Autonomy</i>	19
<i>Beneficence</i>	20
<i>Justice</i>	22
Law and Policy	24
<i>Ethics and Public Affairs</i>	25
<i>Morality and Law</i>	26
<i>Legal and Moral Rights</i>	27
<i>Law, Authority, and Autonomy</i>	27
Suggested Readings	30

PART II Patient-Professional Relationships

CHAPTER 2: RIGHTS AND RESPONSIBILITIES 33

INTRODUCTION

PROFESSIONAL CODES AND STATEMENTS

"The Hippocratic Oath" (ca. Fourth Century B.C.)	39
American Medical Association, Council on Ethical and Judicial Affairs, "Fundamental Elements of the Patient-Physician Relationship" (1994)	40
American Nurses Association, "Code for Nurses" (1985)	41
Ralph Crawshaw, et al., "Patient-Physician Covenant" (1995)	45

THE VIRTUES AND OBLIGATIONS OF PROFESSIONALS

Edmund D. Pellegrino, "The Virtuous Physician and the Ethics of Medicine"	46
Nancy S. Jecker and Donnie J. Self, "Separating Care and Cure: An Analysis of Historical and Contemporary Images of Nursing and Medicine"	52
Norman Daniels, "The Ideal Advocate and Limited Resources"	63

PATIENTS' RIGHTS AND RESPONSIBILITIES

- American Hospital Association, "A Patient's Bill of Rights" (1992) 69
- President's Advisory Commission on Consumer Protection and Quality in the Health Care Industry, "Consumer Bill of Rights and Responsibilities" (1997) 72
- Council of Europe, "Convention for Protection of Human Rights and Dignity of the Human Being with Regard to the Application of Biology and Biomedicine: Convention on Human Rights and Biomedicine" (1997) 74

PROFESSIONALS AND SPECIFIC PATIENT POPULATIONS

- Vanessa Northington Gamble, "Under the Shadow of Tuskegee: African Americans and Health Care" 78
- American Medical Association, Council on Ethical and Judicial Affairs, "Gender Disparities in Clinical Decision Making" 84
- Christine K. Cassel and Bernice L. Neugarten, "The Goals of Medicine in an Aging Society" 89
- Nancy S. Jecker, "Caring for 'Socially Undesirable' Patients" 98
- Paul Chodoff, "The Case for Involuntary Hospitalization of the Mentally Ill" 105
- Suggested Readings 112

CHAPTER 3: THE MANAGEMENT OF MEDICAL INFORMATION 117

INTRODUCTION

TRUTH TELLING AND THE MANAGEMENT OF BAD NEWS

- David C. Thomasma, "Telling the Truth to Patients: A Clinical Ethics Exploration" 123
- Garry S. Sigman, Jerome Kraut, and John La Puma, "Disclosure of a Diagnosis to Children and Adolescents When Parents Object" 127

INFORMED CONSENT

- United States Court of Appeals, *Canterbury v. Spence* 133
- Jay Katz, "Physicians and Patients: A History of Silence" 135
- Ruth R. Faden and Tom L. Beauchamp, "The Concept of Informed Consent" 139
- Robert J. Levine, "Informed Consent: Some Challenges to the Universal Validity of the Western Model" 143

PATIENT SELF-DETERMINATION AND ADVANCE DIRECTIVES

- Susan M. Wolf, et al., "Sources of Concern about the Patient Self-Determination Act" 149
- Rebecca Dresser, "Confronting the 'Near Irrelevance' of Advance Directives" 156
- Linda A. Emanuel, Marion Danis, Robert A. Pearlman, and Peter A. Singer, "Advance Care Planning as a Process: Structuring the Discussions in Practice" 158

THE MANAGEMENT OF CONFIDENTIAL INFORMATION

- California Supreme Court, *Tarasoff v. Regents of the University of California* 164
- Mark Siegler, "Confidentiality in Medicine—A Decrepit Concept" 169
- Sir Douglas Black, "Absolute Confidentiality?" 172
- Lawrence O. Gostin, "Genetic Privacy" 177

- Suggested Readings 186

PART III The Beginning and End of Life

CHAPTER 4: ABORTION AND MATERNAL-FETAL RELATIONS 189

INTRODUCTION

THE PROBLEM OF MORAL JUSTIFICATION

- Don Marquis, "Why Abortion Is Immoral" 196
- Judith Jarvis Thomson, "A Defense of Abortion" 202
- Baruch Brody, "The Morality of Abortion" 212
- Mary Anne Warren, "On the Moral and Legal Status of Abortion" 222

LEGAL ISSUES OF ABORTION

- Susan Dwyer, "A Short Legal History of Abortion in the United States and Canada" 231
- United States Supreme Court, *Roe v. Wade*: Majority Opinion and Dissent 236
- United States Supreme Court, *Planned Parenthood of Southeastern Pennsylvania v. Robert P. Casey, et al., etc.* 240

MATERNAL-FETAL RELATIONSHIPS AND RIGHTS

- United States Supreme Court, *Automobile Workers v. Johnson Controls, Inc.* 247
- District of Columbia Court of Appeals, *In Re A. C.* 249
- Nancy K. Rhoden, "Cesareans and Samaritans" 255
- John Seymour, "A Pregnant Woman's Decision to Decline Treatment: How Should the Law Respond?" 261

Suggested Readings 267

CHAPTER 5: EUTHANASIA AND ASSISTED SUICIDE 271

INTRODUCTION

REFUSAL OF TREATMENT

- California Court of Appeals, Second District, *Bouvia v. Superior Court* 278
- United States Supreme Court, *Cruzan v. Director, Missouri Department of Health* 281
- Lawrence O. Gostin, "Life and Death Choices after *Cruzan*" 286
- John A. Robertson, "*Cruzan*: No Rights Violated" 289

VOLUNTARY ACTIVE EUTHANASIA

- James Rachels, "Active and Passive Euthanasia" 290
- Tom L. Beauchamp and James F. Childress, "Rachels on Active and Passive Euthanasia" 294
- Dan W. Brock, "Voluntary Active Euthanasia" 296
- David C. Thomasma, "When Physicians Choose to Participate in the Death of Their Patients" 305

PHYSICIAN-ASSISTED SUICIDE

- Timothy E. Quill, "Death and Dignity: A Case of Individualized Decision Making" 313
- The Oregon Death with Dignity Act 317
- United States Supreme Court, *Vacco v. Quill* 322
- United States Supreme Court, *Washington v. Glucksberg* 324
- American Medical Association, Council on Ethical and Judicial Affairs, "Physician-Assisted Suicide" 329

James L. Bernat, Bernard Gert, and R. Peter Mogielnicki, "Patient Refusal of Hydration and Nutrition: An Alternative to Physician-Assisted Suicide or Voluntary Active Euthanasia" 332

THE RIGHT TO DIE

F. M. Kamm, "A Right to Choose Death?" 338

Leon R. Kass, "Is There a Right to Die?" 343

Suggested Readings 352

PART IV Access to Health Care

CHAPTER 6: JUSTICE IN THE DISTRIBUTION OF HEALTH CARE 355

INTRODUCTION

JUST HEALTH CARE AND THE RIGHT TO HEALTH CARE

President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research, "Securing Access to Health Care" 362

Robert M. Veatch, "Justice, the Basic Social Contract, and Health Care" 368

Allen E. Buchanan, "The Right to a Decent Minimum of Health Care" 374

H. Tristram Engelhardt, Jr., "Rights to Health Care, Social Justice, and Fairness in Health Care Allocations: Frustrations in the Face of Finitude" 380

MANAGED CARE AND UNIVERSAL ACCESS

Ezekiel J. Emanuel and Nancy Neveloff Dubler, "Preserving the Physician-Patient Relationship in the Era of Managed Care" 387

Lawrence O. Gostin, "Securing Health or Just Health Care? The Effect of the Health Care System on the Health of America" 393

David Orentlicher, "Health Care Reform and the Patient-Physician Relationship" 400

RATIONING AND THE OREGON PLAN

Norman Daniels, "Rationing Fairly: Programmatic Considerations" 406

Leonard M. Fleck, "Just Caring: Oregon, Health Care Rationing, and Informed Democratic Deliberation" 411

Dan W. Brock, "Justice and the ADA: Does Prioritizing and Rationing Health Care Discriminate against the Disabled?" 418

Suggested Readings 423

PART V Biomedical Research and Technology

CHAPTER 7: RESEARCH INVOLVING HUMAN AND ANIMAL SUBJECTS 427

INTRODUCTION

CODES AND GUIDELINES

"The Nuremberg Code" (1947) 433

World Medical Association, "Declaration of Helsinki" (1996) 434

Council for International Organizations of Medical Sciences in collaboration with the World Health Organization, "International Guiding Principles for Biomedical Research Involving Human Subjects" (1993) 436

Council for International Organizations of Medical Sciences, "International Guiding Principles for Biomedical Research Involving Animals" (1985) 441

Baruch A. Brody, "Research Ethics: International Perspectives" 443

ETHICAL ISSUES IN HUMAN RESEARCH

Leon Eisenberg, "The Social Imperatives of Medical Research" 449

Benjamin Freedman, "Equipoise and Ethics of Clinical Research" 457

PAST ABUSES OF HUMAN RESEARCH SUBJECTS

Gregory E. Pence, "The Tuskegee Study" 463

Sheldon H. Harris, "Factories of Death" 470

Advisory Committee on Human Radiation Experiments, "Final Report: Executive Summary" (1995) 479

ETHICAL ISSUES IN ANIMAL RESEARCH

Tom Regan, "The Case against Animal Research" 484

Carl Cohen, "Do Animals Have Rights?" 495

Andrew N. Rowan, "Formulation of Ethical Standards for Use of Animals in Medical Research" 502

Suggested Readings 506

CHAPTER 8: EUGENICS AND HUMAN GENETICS 511

INTRODUCTION

EUGENICS PROGRAMS IN THE TWENTIETH CENTURY

Philip R. Reilly, "Eugenic Sterilization in the United States" 516

United States Supreme Court, *Buck v. Bell* (1927) 526

Stephen Jay Gould, "Carrie Buck's Daughter" 528

Robert Jay Lifton, "Sterilization and the Nazi Biomedical Vision" 533

Veronica Pearson, "Population Policy and Eugenics in China" 541

THE HUMAN GENOME PROJECT AND GENETIC TESTING

Biological Sciences Curriculum Study, "The Human Genome Project" 545

Lee Rowen, Gregory Mahairas, and Leroy Hood, "Sequencing the Human Genome" 547

James D. Watson, "Genes and Politics" 550

United Nations Educational, Scientific, and Cultural Organization, "Universal Declaration on the Human Genome and Human Rights" (December 1997) 555

Institute of Medicine, Committee on Assessing Genetic Risks, "Assessing Genetic Risks: Implications for Health and Social Policy" 559

E. Virginia Lapham, Chahira Kozma, and Joan O. Weiss, "Genetic Discrimination: Perspectives of Consumers" 568

HUMAN GENE THERAPY AND GENETIC ENHANCEMENT

LeRoy Walters and Julie Gage Palmer, "The Ethics of Human Gene Therapy" 573

W. French Anderson, "Human Gene Therapy" 581

Jonathan Glover, "Questions about Some Uses of Genetic Engineering" 586

Erik Parens, "The Goodness of Fragility: On the Prospect of Genetic Technologies Aimed at the Enhancement of Human Capabilities" 596

Suggested Readings 602

CHAPTER 9: REPRODUCTIVE TECHNOLOGIES AND SURROGATE PARENTING ARRANGEMENTS 607

INTRODUCTION

PARENTING AND THE FAMILY

Ruth Macklin, "Artificial Means of Reproduction and Our Understanding of the Family" 612

Barbara Katz Rothman, "Motherhood: Beyond Patriarchy" 619

THE PROBLEM OF INFERTILITY

New York State Task Force on Life and the Law, "The Prevalence of Infertility" 622

Warnock Committee, "Infertility" 626

Barbara Katz Rothman, "Infertility as Disability" 628

United States Supreme Court, "Reproduction as a 'Major Life Activity'" (*Bradgon v. Abbott*, 1998) 633

IN VITRO FERTILIZATION

John A. Robertson, "IVF, Infertility, and the Status of Embryos" 635

Susan Sherwin, "Feminist Ethics and In Vitro Fertilization" 646

SURROGATE PARENTING ARRANGEMENTS

Elizabeth S. Anderson, "Is Women's Labor a Commodity?" 655

Laura M. Purdy, "Surrogate Mothering: Exploitation or Empowerment?" 666

CLONING

Robert Winston, "The Promise of Cloning for Human Medicine" 674

National Bioethics Advisory Commission, "Cloning Human Beings: Executive Summary" (1997) 676

Daniel Callahan, "Cloning: Then and Now" 679

Lee M. Silver, "Cloning, Ethics, and Religion" 682

REGULATING ASSISTED REPRODUCTION

Human Fertilisation and Embryology Authority (United Kingdom), "Annual Report" (1997) 685

ISLAT Working Group, "ART into Science: Regulation of Fertility Techniques" 688

Suggested Readings 691

PART VI Public Health

CHAPTER 10: THE GLOBAL AIDS EPIDEMIC 695

INTRODUCTION

GENERAL ISSUES

Joint United Nations Programme on HIV/AIDS and World Health Organization, "Report on the Global HIV/AIDS Epidemic: June 1998" 701

LeRoy Walters, "Ethical Issues in the Prevention and Treatment of HIV Infection and AIDS" 708

National Research Council, Panel on Monitoring the Social Impact of the AIDS Epidemic, "The Social Impact of AIDS in the United States" 719

Ronald Bayer and Jeff Stryker, "Ethical Challenges Posed by Clinical Progress in AIDS" 723

THE DUTY TO WARN AND THE DUTY NOT TO HARM

- Susan D. Cochran and Vickie M. Mays, "Sex, Lies, and HIV" 727
Ronald Bayer, "AIDS Prevention—Sexual Ethics and Responsibility" 729
Ferdinand Schoeman, "AIDS and Privacy" 733

TESTING AND SCREENING PROGRAMS

- James F. Childress, "Mandatory HIV Screening and Testing" 741
Howard Minkoff and Anne Willoughby, "Pediatric HIV Disease, Zidovudine in Pregnancy, and Unblinding Heelstick Surveys: Reframing the Debate on Prenatal HIV Testing" 758
Deborah Sontag, "H.I.V. Testing for Newborns Debated Anew" 763

ISSUES IN CLINICAL RESEARCH ON HIV/AIDS

- Peter Lurie and Sidney M. Wolfe, "Unethical Trials of Interventions to Reduce Perinatal Transmission of the Human Immunodeficiency Virus in Developing Countries" 766
Marcia Angell, "The Ethics of Clinical Research in the Third World" 770
Harold Varmus and David Satcher, "Ethical Complexities of Conducting Research in Developing Countries" 773
Danstan Bagenda and Philippa Musoke-Mudido, "We're Trying to Help Our Sickest People, Not Exploit Them" 776
Praphan Phanuphak, "Ethical Issues in Studies in Thailand of the Vertical Transmission of HIV" 778
P. Vuthipongse, et al. "Administration of Zidovudine during Late Pregnancy and Delivery to Prevent Perinatal HIV Transmission — Thailand, 1996–1998" 780

Suggested Readings 782

Part I

INTRODUCTION TO ETHICS

1.

Ethical Theory and Bioethics

The moral problems discussed in this book have emerged from professional practice in the fields of clinical medicine, biomedical research, nursing, public health, and the social and behavioral sciences. The goal of this first chapter is to provide a basis in ethical theory and bioethics sufficient for reading and criticizing the selections in the later chapters.

FUNDAMENTAL PROBLEMS

THE STUDY OF MORALITY

Some Basic Definitions. The field of ethics includes the study of social morality as well as philosophical reflection on its norms and practices. The terms “ethical theory” and “moral philosophy” refer exclusively to philosophical reflection on morality. The term “morality,” by contrast, refers to traditions of belief about right and wrong human conduct. Morality is a social institution with a history and a code of learnable rules. Like political constitutions and languages, morality exists before we are instructed in its relevant rules, and thus it has a trans-individual status as a body of guidelines for action.

Individuals do not create their morality by making their own rules, and morality cannot be purely a personal policy or code. The core parts of morality exist before their acceptance by individuals. We learn about these moral responsibilities and moral ideals as we grow up. We also gradually learn to distinguish the general morality that holds for all persons (sometimes called the common morality) from rules that bind only members of special groups, such as physicians. We learn moral rules alongside other important social rules, which is one reason it later becomes difficult to distinguish the two. For example, we are constantly reminded in our early years that we must observe social rules of etiquette such as saying “Please” when we want something and “Thank you” when we receive it, as well as more specific rules such as “A judge is addressed as ‘judge.’” We are also taught rules of prudence, including “Don’t touch a hot stove,” together with rules of housekeeping, dressing, and the like.

But the whole of these rules does not amount to morality. Morality enters the picture when certain actions ought or ought not to be performed because of the considerable impact these actions can be expected to have on the interests of other people. We first learn maxims such as “It is better to give than to receive” and “Respect the rights of others.” These are elementary instructions in morality; they express what society expects of us and of everyone in terms of taking the interests of other people into account. We thus learn about moral instructions and expectations, and gradually we come to understand morality as a set of normative standards about doing good, avoiding harm, respecting others, keeping promises, and acting fairly. We also absorb standards of character and moral excellence.

Following this analysis, the terms “ethical” and “moral” are to be understood in this introduction as identical in meaning, and “ethics” will be used as a general term referring to

both morality and ethical theory. The terms “moral philosophy,” “ethical theory,” and “philosophical ethics” will be reserved for philosophical theories about the moral life.

Four Approaches to the Study of Ethics. Morality can be studied and developed in a variety of ways. In particular, four ways of either studying moral beliefs or doing moral philosophy appear prominently in the literature of ethics. Two of these approaches describe and analyze morality without taking moral positions, and these approaches are therefore called “nonnormative.” Two other approaches do involve taking moral positions, and are therefore “normative.” These four approaches can be grouped as follows:

A. *Nonnormative approaches*

1. Descriptive ethics
2. Metaethics

B. *Normative approaches*

3. General normative ethics
4. Practical normative ethics

It would be a mistake to regard these categories as expressing rigid, sharply differentiated approaches. They are often undertaken at the same time, and they overlap in goal and content. Nonetheless, when understood as broad polar contrasts exemplifying models of inquiry, these distinctions are important.

First among the two nonnormative fields of inquiry into morality is descriptive ethics, or the factual description and explanation of moral behavior and beliefs. Anthropologists, sociologists, and historians who study moral behavior employ this approach when they explore how moral attitudes, codes, and beliefs differ from person to person and from society to society. Their works often dwell in detail on matters such as professional codes and practices, codes of honor, and rules governing permissible killing in a society. Although philosophers do not typically engage in descriptive ethics in their work, some have combined descriptive ethics with philosophical ethics—for example, by analyzing the ethical practices of American Indian tribes or researching Nazi experimentation during World War II.

The second nonnormative field, metaethics, involves analysis of the meanings of central terms in ethics, such as “right,” “obligation,” “good,” “virtue,” and “responsibility.” The proper analysis of the term “morality” and the distinction between the moral and the non-moral are typical metaethical problems. Crucial terms in bioethics, including “physician-assisted suicide,” “informed consent,” and “universal access” to health care, can be and should be given careful conceptual attention, and they are so treated in various chapters in this volume. (Descriptive ethics and metaethics may not be the only forms of nonnormative inquiry. In recent years there has been an active discussion of the biological bases of moral behavior and of the ways in which humans do and do not differ from animals.)

General normative ethics attempts to formulate and defend basic principles and virtues governing the moral life. Ideally, any ethical theory will provide a system of moral principles or virtues and reasons for adopting them, and will defend claims about the range of their applicability. In the course of this chapter the most prominent of these theories will be examined, as will various principles of respect for autonomy, justice, and beneficence that have played a major role in some of these theories.

General normative theories are sometimes used to justify positions on particular moral problems such as abortion, euthanasia, the distribution of health care, and research involving human subjects. Usually, however, no direct move can be made from theory or principles to particular judgments, and theory and principles therefore typically only *facilitate* the

development of policies, action-guides, or judgments. In general, the attempt to delineate practical action guides is referred to as “practical ethics” (B.4 above).

Substantially the same general ethical theories and principles apply to problems across different professional fields and in areas beyond professional ethics as well. One might appeal to principles of justice, for example, in order to illuminate and resolve issues of taxation, health care distribution, criminal punishment, and affirmative action in hiring. Similarly, principles of veracity (truthfulness) are invoked to discuss secrecy and deception in international politics, misleading advertisements in business ethics, balanced reporting in journalistic ethics, and the disclosure of the nature and extent of an illness to a patient in medical ethics.

MORAL DILEMMAS AND DISAGREEMENTS

In the teaching of ethics, moral problems are often examined through cases, particularly law cases, clinical cases, and public policy cases. These cases, which appear in virtually every chapter in this book, vividly display dilemmas and disagreements that require students to identify and grapple with real moral problems.

Moral Dilemmas. In a case presented in Chapter 3, two judges became entangled in apparent moral disagreement when confronted with a murder trial. A woman named Tarasoff had been killed by a man who previously had confided to a therapist his intention to kill her as soon as she returned home from a summer vacation. Owing to obligations of confidentiality between patient and physician, a psychologist and a consulting psychiatrist did not report the threat to the woman or to her family, though they did make one unsuccessful attempt to commit the man to a mental hospital.

One judge held that the therapist could not escape liability: “When a therapist determines, or pursuant to the standards of his profession should determine, that his patient presents a serious danger of violence to another, he incurs an obligation to use reasonable care to protect the intended victim against such danger.” Notification of police and direct warning to the family were mentioned as possible instances of due care. The judge argued that, although medical confidentiality must generally be observed by physicians, it was overridden in this particular case by an obligation to the possible victim and to the “public interest in safety from violent assault.”

In the minority opinion, a second judge stated his firm disagreement. He argues that a patient’s rights are violated when rules of confidentiality are not observed, that psychiatric treatment would be frustrated by nonobservance, and that patients would subsequently lose confidence in psychiatrists and would fail to provide full disclosures. He also suggested that violent assaults would actually increase because mentally ill persons would be discouraged from seeking psychiatric aid.¹

The Tarasoff case is an instance of a moral dilemma, because strong moral reasons support the rival conclusions of the two judges. The most difficult and recalcitrant moral controversies that we encounter in this volume generally have at least some dilemmatic features. They may even involve what Guido Calabresi has called “tragic choices.” Everyone who has been faced with a difficult decision—such as whether to have an abortion, to have a pet “put to sleep,” or to commit a member of one’s family to a mental institution—knows through deep anguish what is meant by a personal dilemma.

Dilemmas occur whenever good reasons for mutually exclusive alternatives can be cited; if any one set of reasons is acted upon, events will result that are desirable in some respects but undesirable in others. Here an agent morally ought to do one thing and also morally ought to do another thing, but the agent is precluded by circumstances from doing both. Although

the moral reasons behind each alternative are good reasons, neither set of reasons clearly outweighs the other. Parties on both sides of dilemmatic disagreements thus can *correctly* present moral reasons in support of their competing conclusions. The reasons behind each alternative are good and weighty, and neither set of reasons is obviously the best set. Most moral dilemmas therefore present a need to balance rival claims in untidy circumstances.

One possible response to the problem of public moral dilemmas and disputes is that we do not have and are not likely ever to have a single theory or method for resolving public disagreements. In any pluralistic culture there may be many sources of moral value and consequently a pluralism of moral points of view on many issues: bluffing in business deals, providing national health insurance to all citizens, involuntarily committing the mentally disturbed, civil disobedience in pursuit of justice, and so on. If this response is correct, we can understand why there seem to be intractable moral dilemmas and controversies both inside and outside professional philosophy. However, there also are ways to alleviate at least some dilemmas and disagreements, as we shall now see.

The Resolution of Moral Disagreements. No single set of considerations is an entirely reliable method for resolving disagreement and controversy, but several methods for dealing constructively with moral disagreements have been employed in the past. Each deserves recognition as a method of constructively contending with disagreement.

1. *Obtaining Objective Information.* First, many moral disagreements can be at least facilitated by obtaining factual information concerning points of moral controversy. It has often been assumed that moral disputes are produced solely by differences over moral principles or their interpretation and application, rather than by a lack of information. However, disputes over what morally ought or ought not to be done often have nonmoral elements as central ingredients. For example, debates about the justice of government allocation of health dollars to preventive and educational strategies (see Chapter 6) have often bogged down over factual issues of whether these strategies actually function to prevent illness and promote health.

In some cases new information facilitates negotiation and compromise. New information about the alleged dangers involved in certain kinds of scientific research, for instance, have turned public controversies regarding the risks of science and the rights of scientific researchers in unanticipated directions. In several controversies over research with a high level of uncertainty, it has been feared that the research might create an irreversible and dangerous situation (for example, by releasing an organism of pathogenic capability that known antibodies would be unable to combat and that could produce widespread contagion).

Controversies about sweetening agents for drinks, toxic substances in the workplace, pesticides in agriculture, radiation therapies, and vaccine dissemination, among others, have been laced with issues of both values and facts. Current controversies over whether there should be compulsory screening for AIDS sometimes turn chiefly on factual claims about how much can be learned by screening, how many persons are threatened, whether health education campaigns can successfully teach safe sex practices, and the like.

The arguments used by disagreeing parties in these cases sometimes turn on a dispute about liberty or justice and therefore sometimes are primarily normative, but they may also rest on purely factual disagreements. New information may have only a limited bearing on the resolution of some of these controversies, whereas in others it may have a direct and almost overpowering influence. The problem is that rarely, if ever, is all the information obtained that would be sufficient to settle factual disagreements.