Ethical Reasoning & Confronting Relativism

Ethics: Bioethics (Fall 2014) Laura Guidry-Grimes

Case of Baby Theresa

Questions to ask:

- Are anencephalic infants alive or dead?
- Does Baby Theresa have any morally relevant interests?
 - Is biological existence *intrinsically* valuable?
- Is it legally and morally permissible to remove organs from a live donor, thereby killing the donor?
- Do physicians have an obligation one way or the other?
- What are the parents' obligations to the infant, to other infants?
- How can a hospital craft responsible policy in these sorts of scenarios? What place does public opinion have, if any?
- ...others?

Case of Baby Theresa

For Live Donation

- General principle (GP): "*If we can benefit someone without harming anyone, we ought to do so."*
- Quality of life, not mere existence, is what matters morally.
- What are moral reasons for not "using" someone, and what does this mean?
 - Autonomy, best interests, substituted judgment N/A
- Refutation: Sometimes sacrifice is morally and professionally permissible

Against Live Donation

- Will it benefit others...yes
- Will it harm BT...
 Pain, suffering, anxiety?...no
- Hastened death...yes
 Refutation: Sanctity of life
- Using the infant...?
 - Refutation: slippery slope, dignitary harm

GP does not apply when killing, especially innocents and especially for doctors

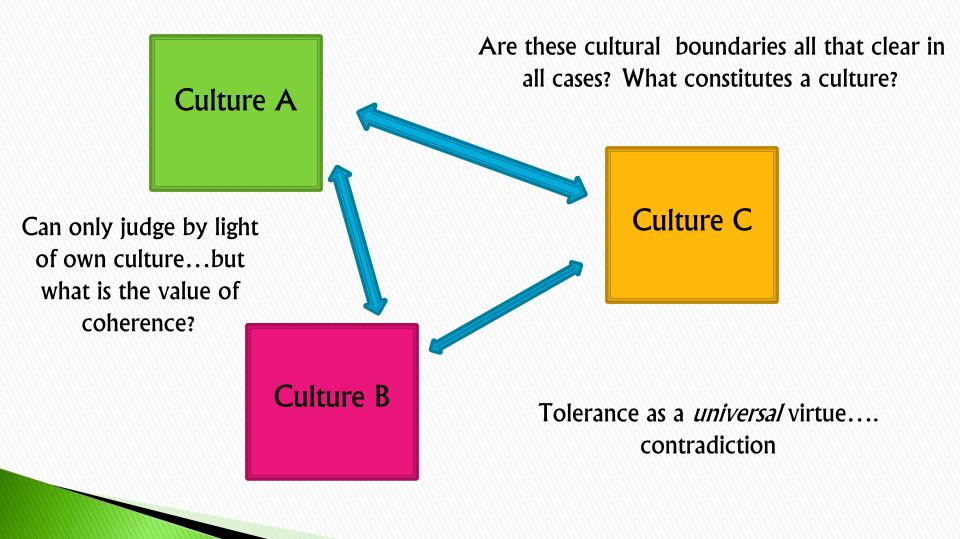
Remaining Questions ...

- Does the stated GP entail supererogatory duties or strict obligations?
- What is *dignitary harm*?
 - Can an anencephalic infant suffer this kind of harm?
- How do we and should we make quality of life judgments?
- How significant a concern is the slippery slope argument?
- Should physicians ever knowingly hasten death?
 - Is there a relevant moral distinction between *killing* and *letting die*, and is that distinction relevant here?

Other Cases

- Break into groups and unpack the arguments similarly! Diagram in a way that you find helpful!
 - Reasons used by opposing sides
 - **Support** for those reasons? (additional arguments, legal precedent, scientific facts, etc.?)
 - Do those reasons support the conclusion??
 - **Refutations** of those reasons by the other side?
 - Feel free to challenge or question analysis offered by Rachels & Rachels
 - Do you see room for minimal agreement, negotiation, other positions?
 - Beware false dilemmas!
 - Are there useful *analogies* or illuminative *disanalogies* in the different cases that can help us figure out what ought to be done?

Cultural Relativism



Cultural Relativism

- OBSERVATION: Culture A and Culture B have different values.
- CONCLUSION: There can be no universal values.
 - (So we should not judge other cultures, since doing so would incorrectly assume there are independent standards, and we risk cultural imperialism.)
- Problems (among others)
 - Over-simplified observation, since different value beliefs can break into
 - Commonly held values +
 - Different social, historical, religious/cosmological, environmental circumstances
 - Moving from *descriptive* premise to *normative* conclusion
 - Can make moral judgments without authorizing imperialistic measures
 - Threat of collapse of all meaningful ethical reasoning

Discussion

- How do you foresee cultural relativism posing distinctive challenges for bioethics?
 - For example: Imagine physician and nurse from vastly different cultural backgrounds and ethical assumptions
- How might cultural differences be addressed in a responsible manner without falling into relativistic thinking?
 - Examples?



>> COMMENTS?