

Ethics

Dr. Huginn F. Þorsteinsson





Theory 1. Moral Objectivism

- Moral Objectivism: What is morally right or wrong doesn't depend on what anyone thinks is right or wrong. 'Moral facts' are like 'physical' facts in that what the facts are does not depend on what anyone thinks they are. They simply have to be discovered.
- But 'moral facts' have to be different from 'physical' facts.
- Consider two different claims:
 - P: It is raining outside.
 - M: Torture is morally wrong.





Theory 2. Moral Relativism

- Moral Relativism: What is morally right or wrong depends on the prevailing view in the society or culture we happen to be dealing with.
- Often presented as a tolerant view: 'if moral relativism is true, no one has a right to force his moral views on others.'





Objectivist Theories

- Suppose for the moments that objectivism is true. What are the objective facts of morality?
- Main Candidates:
 - Consequentialism
 - Deontological Theories
- Moral theories offer us also guidance to act.





Theory 3: Consequentialism

- Consequentialists maintain that whether an action is morally right or wrong depends on the action's consequences.
- In any situation, the morally right thing to do is whatever will have the best consequences.
- Consequentialist theories are sometimes called teleological theories.





What Kind of Consequences?

- Consequentialism isn't very informative unless it's combined with a theory about what the best consequences are.
- Utilitarianism is such a theory.
 - Utilitarianism is the most influential variety of consequentialism. Put forward by Jeremy Bentham (1748-1832) and greatly improved by John Stuart Mill (1806-1873).
- Virtue Ethics is such a theory.
 - Virtue ethics argues that action according to virtues leads to happiness.





Utilitarianism

- The Basis of Utilitarianism: ask what has intrinsic value and assess the consequences of an action in terms of intrinsically valuable things.
 - Instrumental Value a thing has only instrumental value if it is only valuable for what it may get you
 - e.g., money
 - Intrinsic Value a thing has intrinsic value if you value it for itself
 - i.e., you'd value it even if it brought you nothing else
- What, if anything, has intrinsic value?





Only Happiness has Intrinsic Value

- What Utilitarians Think Is Intrinsically Valuable: happiness (or pleasure or satisfaction...)
- "actions are right in proportion as they tend to promote happiness, wrong as they tend to produce the reverse of happiness." (John Stuart Mill's Greatest Happiness Principle)
- In other words, judge an action by the total amount of happiness and unhappiness it creates.
- "It is better to be a human being dissatisfied than a pig satisfied; better to be Socrates dissatisfied than a fool satisfied. And if the fool, or the pig, are a different opinion, it is because they only know their own side of the question."

 John Stuart Mill, Utilitarianism (1863)





Act or rule utilitarianism

- Different versions of utilitarianism depending on the focus on acts or rules.
- Act utilitarianism focuses on evaluating the consequences of action according to the happiness principle.
- Rule utilitarianism focuse on evaluating the rule that should govern action rather than individual instances.
- Different outcomes depending on which version one follows.





Theory 4: Deontology

- 'Duty Based' Ethics
- Deontologists deny that what ultimately matters is an action's consequences.
- They claim that what matters is the kind of action it is. What matters is doing our duty.
- There are many kinds of deontological theory
 - e.g., The 'Golden Rule' "Do unto others as you'd have them do unto you."



Kantian Deontology

- Immanuel Kant (1724-1804) is the most influential deontologist.
- Rejecting Consequentialism: "A good will is good not because of what it effects or accomplishes." Even if by bad luck a good person never accomplishes anything much, the good will would "like a jewel, still shine by its own light as something which has its full value in itself."





The Categorical Imperative

- Kant claims that all our actions should be judged according to a rule he calls the Categorical Imperative.
- First Version: "Act only according to that maxim [i.e., rule] whereby you can at the same time will that it become a universal law."
- Second Version: "Act in such a way that you treat humanity, whether in your own person or in the person of another, always at the same time as an end and never simply as a means."
 - Important to treat people as autonomous agents
- There is a third version but not important here. However, Kant argues that these versions are equivalent formulations.





Categorical Imperative

- Kant's thinking influential in arguments for human rights.
- Informed consent based on the idea that people are not only used for the benefits of medical research.
- Value the autonomy of individuals. The change from paternalistic medicine to autonomy of patients.





Problems

- Deontology: What if doing your duty has repugnant consequences?
 - Kant on telling lies.
- Consequentialism: What if you have to do something that seems wrong in order to produce the best consequences?
 - Convicting the innocent.





Basic Principles of Ethics

- Often there is a reference to the four basic principles of health care ethics when evaluating the merits and difficulties of medical procedures.
- Ideally, for a medical practice to be considered "ethical", it must respect all four of these principles: autonomy, justice, beneficence, and non-maleficence.





Autonomy

- Requires that the patient have autonomy of thought, intention, and action when making decisions regarding health care procedures. Therefore, the decisionmaking process must be free of coercion or coaxing.
- In order for a patient to make a fully informed decision, she/he must understand all risks and benefits of the procedure and the likelihood of success.





Justice

- The idea that the burdens and benefits of new or experimental treatments must be distributed equally among all groups in society. Requires that procedures uphold the spirit of existing laws and are fair to all players involved.
- The health care provider must consider four main areas when evaluating justice: fair distribution of scarce resources, competing needs, rights and obligations, and potential conflicts with established legislation.





Beneficence

 Requires that the procedure be provided with the intent of doing good for the patient involved. Demands that health care providers develop and maintain skills and knowledge, continually update training, consider individual circumstances of all patients, and strive for net benefit.





Non-maleficence

 Requires that a procedure does not harm the patient involved or others in society.





Helsinki Declaration



Vulnerable Groups and Individuals

- 19. Some groups and individuals are particularly vulnerable and may have an increased likelihood of being wronged or of incurring additional harm.
- All vulnerable groups and individuals should receive specifically considered protection.
- 20. Medical research with a vulnerable group is only justified if the research is responsive to the health needs or priorities of this group and the research cannot be carried out in a non-vulnerable group. In addition, this group should stand to benefit from the knowledge, practices or interventions that result from the research.



Scientific Requirements and Research Protocols

- 21. Medical research involving human subjects must conform to generally accepted scientific principles, be based on a thorough knowledge of the scientific literature, other relevant sources of information, and adequate laboratory and, as appropriate, animal experimentation. The welfare of animals used for research must be respected.
- 22. The design and performance of each research study involving human subjects must be clearly described and justified in a research protocol.
- The protocol should contain a statement of the ethical considerations involved and should indicate how the principles in this Declaration have been addressed. The protocol should include information regarding funding, sponsors, institutional affiliations, potential conflicts of interest, incentives for subjects and information regarding provisions for treating and/or compensating subjects who are harmed as a consequence of participation in the research study.
- In clinical trials, the protocol must also describe appropriate arrangements for post-trial provisions.



Informed Consent

- 26. In medical research involving human subjects capable of giving informed consent, each potential subject must be adequately informed of the aims, methods, sources of funding, any possible conflicts of interest, institutional affiliations of the researcher, the anticipated benefits and potential risks of the study and the discomfort it may entail, post-study provisions and any other relevant aspects of the study. The potential subject must be informed of the right to refuse to participate in the study or to withdraw consent to participate at any time without reprisal. Special attention should be given to the specific information needs of individual potential subjects as well as to the methods used to deliver the information.
- After ensuring that the potential subject has understood the information, the
 physician or another appropriately qualified individual must then seek the
 potential subject's freely-given informed consent, preferably in writing. If the
 consent cannot be expressed in writing, the non-written consent must be
 formally documented and witnessed.
- All medical research subjects should be given the option of being informed about the general outcome and results of the study.



Informed Consent

 28. For a potential research subject who is incapable of giving informed consent, the physician must seek informed consent from the legally authorised representative. These individuals must not be included in a research study that has no likelihood of benefit for them unless it is intended to promote the health of the group represented by the potential subject, the research cannot instead be performed with persons capable of providing informed consent, and the research entails only minimal risk and minimal burden.



deCode (1996-2004)

- deCode Genetics a private company granted by law access to medical records and genetic data.
- Genetic data in the database from the total population, adult and children, mentally competent or not, of the living Icelandic people (around 270.000 people) but also from deceased Icelanders (total number: around 700.000 people).
- Interesting case on informed consent, presumed consent and even community consent (?)

