

# Introduction to Ethics

Karen L. Rich

*A seed will only become a flower if it gets sun and water.*

—LOUIS GOTTSCHALK

## OBJECTIVES

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After reading this chapter, the reader should be able to:

1. Define the terms *ethics* and *morals* and discuss philosophical uses of these terms.
2. Discuss systems of moral reasoning as they have been used throughout history.
3. Evaluate a variety of ethical theories and approaches to use in personal and professional relationships.

## Introduction to Ethics

In the world today, “we are in the throes of a giant ethical leap that is essentially embracing all of humankind” (Donahue, 1996, p. 484). Scientific and technological advances, economic realities, pluralistic worldviews, and global communication make it difficult for nurses to ignore the important ethical issues in the world community, their everyday lives, and their work. As controversial and sensitive ethical issues continue to challenge nurses and other healthcare professionals, many professionals have begun to develop an appreciation for traditional philosophies of ethics and the diverse viewpoints of others.

Ethical directives are not always clearly evident, and people sometimes disagree about what is right and wrong. These factors lead some people to believe

that ethics can be based merely on personal opinions. However, if nurses are to enter into the global dialogue about ethics, they must do more than practice ethics based simply on their personal opinions, their intuition, or the unexamined beliefs that are proposed by other people. It is important for nurses to have a basic understanding of the concepts, principles, approaches, and theories that have been used in studying ethics throughout history so that they can identify and analyze ethical issues and dilemmas that are relevant to nurses in the 21st century. Mature ethical sensitivities are critical to ethical practice, and as Hope (2004) proposed, “we need to develop our hearts as well as our minds” (p. 6).

### *The Meaning of Ethics and Morals*

When narrowly defined according to its original use, ethics is a branch of philosophy that used to study ideal human behavior and ideal ways of being. The approaches to ethics and the meanings of related concepts have varied over time among philosophers and ethicists. For example, Aristotle believed that ideal behaviors were practices that lead to the end goal of *eudaimonia*, which is synonymous with a high level of happiness or well-being; on the other hand, Immanuel Kant, an 18th-century philosopher and ethicist, believed that ideal behavior was acting in accordance with one’s duty. For Kant, well-being meant having the freedom to exercise autonomy (self-determination), not being used as a means to an end, being treated with dignity, and having the capability to think rationally.

As a philosophical discipline of study, **ethics** is a systematic approach to understanding, analyzing, and distinguishing matters of right and wrong, good and bad, and admirable and deplorable as they relate to the well-being of and the relationships among sentient beings. Ethical determinations are applied through the use of formal theories, approaches, and codes of conduct, such as codes that are developed for professions and religions. Ethics is an active process rather than a static condition, so some ethicists use the expression *doing ethics*. When people are doing ethics, they need to support their beliefs and assertions with sound reasoning; in other words, even if people believe that ethics is totally subjective, they must be able to justify their positions through logical, theoretically based arguments. Feelings and emotions are a normal part of everyday life and can play a legitimate role in doing ethics. However, people sometimes allow their emotions to overtake good reasoning, and when this happens, it does not provide a good foundation for ethics-related decisions. Evaluations generated through the practice of ethics require a balance of emotion and reason. Throughout history, people, based on their culture, have engaged in actions that they believed were justifiable only to have the light of reason later show otherwise. Following a charismatic, but ego-centric, leader, such as Adolph Hitler, is an example of such a practice.

As contrasted with ethics, **morals** are specific beliefs, behaviors, and ways of being derived from doing ethics. One’s morals are judged to be good or bad

through systematic ethical analysis. The reverse of morality is immorality, which means that a person's behavior is in opposition to accepted societal, religious, cultural, or professional ethical standards and principles; examples of immorality include dishonesty, fraud, murder, and sexually abusive acts. *Amoral* is a term used to refer to actions that can normally be judged as moral or immoral, but are done with a lack of concern for good behavior. For example, murder is immoral, but if a person commits murder with absolutely no sense of remorse or maybe even a sense of pleasure, the person is acting in an amoral way. Acts are considered to be nonmoral if moral standards essentially do not apply to the acts; for example, choosing between cereal and toast and jam for breakfast is a nonmoral decision.

When people consider matters of ethics, they usually are considering matters about freedom in regard to personal choices, one's obligations to other sentient beings, or judgments about human character. The term *unethical* is used to describe ethics in its negative form when, for instance, a person's character or behavior is contrary to admirable traits or the code of conduct that has been endorsed by one's society, community, or profession. Because the word *ethics* is used when one may actually be referring to a situation of morals, the process-related or *doing* conception of ethics is sometimes overlooked today. People often use the word *ethics* when referring to a collection of actual beliefs and behaviors, thereby using the terms ethics and morals interchangeably. In this book, some effort has been made to distinguish the words *ethics* and *morals* based on their literal meanings; however, because of common uses, the terms have generally been used interchangeably.

Billington (2003) delineated important features regarding the concepts *morals* and *ethics*:

- Probably the most important feature about ethics and morals is that no one can avoid making moral or ethical decisions because the social connection with others necessitates that people must consider moral and ethical actions.
- Other people are always involved with one's moral and ethical decisions. Private morality does not exist.
- Moral decisions matter because every decision affects someone else's life, self-esteem, or happiness level.
- Definite conclusions or resolutions will never be reached in ethical debates.
- In the area of morals and ethics, people cannot exercise moral judgment without being given a choice; in other words, a necessity for making a sound moral judgment is being able to choose an option from among a number of choices.
- People use moral reasoning to make moral judgments or to discover right actions.

## Types of Ethical Inquiry

Ethics is categorized according to three types of inquiry or study: normative ethics, meta-ethics, and descriptive ethics. The first approach, **normative ethics**, is an attempt to decide or prescribe values, behaviors, and ways of being that are right or wrong, good or bad, admirable or deplorable. When using the method of normative ethics, inquiries are made about how humans should behave, what ought to be done in certain situations, what type of character one should have, or how one should be.

Outcomes of normative ethics are the prescriptions derived from asking normative questions. These prescriptions include accepted moral standards and codes. One such accepted moral standard is the common morality. The **common morality** consists of normative beliefs and behaviors that the members of society generally agree about and that are familiar to most human beings. Because it forms what can be thought of as a universal morality, the common morality provides society with a framework of ethical stability. The belief that robbing a bank and murder are wrong is part of the common morality, whereas abortion is not a part of our common morality, because of the many varying positions about the rightness or wrongness of it.

Particular moralities adhered to by specific groups can be distinguished from the common morality (Beauchamp & Childress, 2009). Particular moralities, such as a profession's moral norms and codes, are heavily content laden and specific, rather than general, in nature. The *Code of Ethics for Nurses with Interpretive Statements* (American Nurses Association [ANA], 2001) is a specific morality for professional nurses in the United States. A normative belief posited in the *Code* is that nurses ought to be compassionate—that is, nurses should work to relieve suffering. Nurses have specific obligations toward the recipients of their care that are different from the obligations of other people. As risks and dangers for nurses become more complex, the profession's morality must evolve and be continually reexamined. Nurses might ask themselves these normative questions: Do I have an obligation to endanger my life and the life of my family members by working during a highly lethal influenza pandemic? Do I have an obligation to stay at work in a hospital during a category 5 hurricane rather than evacuating with my family? The answers to these questions may generate strong emotions, confusion, or feelings of guilt.

The focus of meta-ethics, which means “about ethics,” is not an inquiry about what ought to be done or what behaviors should be prescribed. Instead, **meta-ethics** is concerned with understanding the language of morality through an analysis of the meaning of ethically related concepts and theories, such as the meaning of *good*, *happiness*, and *virtuous character*. For example, a nurse who is actively engaging in a meta-ethical analysis might try to determine the meaning of a good nurse–patient relationship.

**Descriptive ethics** is often referred to as a scientific rather than a philosophical ethical inquiry. It is an approach used when researchers or ethicists want to describe what people think about morality or when they want to describe how people actually behave—that is, their morals. Professional moral values and behaviors can be described through nursing research. An example of descriptive ethics is research that identifies nurses' attitudes regarding telling patients the truth about their terminal illnesses.

## *Ethical Perspectives*

Ethical thinking, valuing, and reasoning fall somewhere along a continuum between two opposing views: ethical relativism and ethical objectivism.

### **Ethical Relativism**

**Ethical relativism** is the belief that it is acceptable for ethics and morality to differ among persons or societies. There are two types of ethical relativism: ethical subjectivism and cultural relativism (Brannigan & Boss, 2001). People who subscribe to a belief in **ethical subjectivism** believe “that individuals create their own morality [and that] there are no objective moral truths—only individual opinions” (p. 7). People's beliefs about actions being right or wrong, or good or bad, depend on how people feel about actions rather than on reason or systematic ethical analysis. What is believed by one person to be wrong might not be viewed as wrong by one's neighbor depending on variations in opinions and feelings. These differences are acceptable to ethical subjectivists.

Ethical subjectivism has been distinguished from cultural relativism. Pence (2000) defined **cultural relativism** as “the ethical theory that moral evaluation is rooted in and cannot be separated from the experience, beliefs, and behaviors of a particular culture, and hence, that what is wrong in one culture may not be so in another” (p. 12). People opposed to cultural relativism argue that when it is practiced according to its extreme or literal meaning, this type of thinking can be dangerous because it theoretically may support relativists' exploitative or hurtful actions (Brannigan & Boss, 2001). An example of cultural relativism is the belief that the act of female circumcision, which is sometimes called female genital mutilation, is a moral practice. Though not considered to be a religious ritual, this act is considered ethically acceptable by some groups in countries that have a Muslim or an Egyptian Pharaonic heritage. In most countries and cultures, however, it is considered to be a grave violation in accordance with the United Nations' Declaration of Human Rights.

### **Ethical Objectivism**

**Ethical objectivism** is the belief that universal or objective moral principles exist. Many philosophers and healthcare ethicists hold this view, at least to some degree,

## Ethical Reflections

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Where does your worldview fall on the continuum between ethical relativism and ethical objectivism? Explain.

because they strictly or loosely adhere to a specific approach in determining what is good. Examples of objectivist ethical theories and approaches are deontology, utilitarianism, and natural law theory, which are discussed later in this chapter. Though some ethicists believe that these different theories or approaches are mutually exclusive, theories and approaches often overlap when used in practice. “Moral judgment is a whole into which we must fit principles, character and intentions, cultural values, circumstances, and consequences” (Brannigan & Boss, 2001, p. 23).

## Values and Moral Reasoning

Because ethics falls within the abstract discipline of philosophy, ethics involves many different perspectives of what people value as meaningful and good in their lives. A **value** is something of worth or something that is highly regarded. Values refer to one’s evaluative judgments about what one believes is good or what makes something desirable. The things that people esteem as “good” influence how personal character develops and how people think and subsequently behave. Professional values are outlined in professional codes. A fundamental position in the ANA’s (2001) *Code of Ethics for Nurses with Interpretive Statements* is that professional values and personal values must be integrated. Values and moral reasoning in nursing fall under the domain of normative ethics; that is, professional values contained in the *Code of Ethics for Nurses* guide nurses in how they ought to be and behave.

**Reasoning** is the use of abstract thought processes to think creatively, to answer questions, to solve problems, and to formulate strategies for one’s actions and desired ways of being. When people participate in reasoning, they do not merely accept the unexamined beliefs and ideas of other people. Reasoning involves thinking for oneself to determine if one’s conclusions are based on good or logical foundations. More specifically, **moral reasoning** pertains to reasoning focused on moral or ethical issues. Moral reasoning for nurses usually occurs in the context of day-to-day relationships between nurses and the recipients of their care and between nurses and their coworkers.

## Moral Reasoning throughout Western History

Different values, worldviews, and ways of moral reasoning have evolved throughout history and have had different points of emphasis in varying historical periods. In regard to some approaches to reasoning about moral issues, what was old becomes new again, as in the case of the renewed popularity of virtue ethics—the concept of reasoning as would a person with good character.

## Ancient Greece

In Western history, much of what is known about formal moral reasoning generally began with the ancient Greeks, especially with the philosophers Socrates (c. 469–399 B.C.E.), Plato (c. 429–347 B.C.E.), and Aristotle (384–322 B.C.E.). Though there are no primary texts of the teachings of Socrates (what we have of his teachings were recorded by Plato), it is known that Socrates was an avid promoter of moral reasoning and critical thinking among the citizens of Athens. Socrates is credited with the statement that “the unexamined life is not worth living,” and he developed a method of reasoning called the Socratic method, which is still used today (see Box 1.1).

Socrates had many friends and allies who believed in his philosophy and teachings. In fact, Socrates was such a successful and well-known teacher of philosophy and moral reasoning in Athens that he was put to death for upsetting the sociopolitical *status quo*. Socrates was accused of corrupting the youth of Athens who, under his tutelage, had begun to question their parents’ wisdom and religious beliefs. These accusations of corruption were based on Socrates’s encouraging people to think independently and to question dogma generated by the ruling class. Though he was sentenced to death by the powerful, elite men within his society, Socrates refused to apologize for his beliefs and teachings. He ultimately chose to die by drinking poisonous hemlock rather than to deny his values.

Socrates’s student, Plato, is believed by some people to have been the most outstanding philosopher to have ever lived. Plato’s reasoning was based on his belief that there are two realms of reality. The first is the realm of Forms, which transcends time and space. According to Plato, an eternal, perfect, and unchanging ideal copy (Form)

### BOX 1.1 ETHICAL FORMATIONS: THE SOCRATIC METHOD

Socrates posited challenging questions, and he would then ask another question about the answers that he received. An example of his method of questioning might be as follows:

Socrates: Why should nurses study ethics?

Nurse: To be good nurses.

Socrates: What is a good nurse?

Nurse: It means that my patients are well taken care of.

Socrates: How do you know that your patients are well taken care of?

This line of questioning continues on until the concepts stemming from the original question are thoroughly explored. Socratic questioning does not mean that one ends up with a final answer; however, this form of discussion leads people to think critically and reflectively.

## Ethical Reflections

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- Begin a Socratic dialogue with classmates or colleagues. Develop your own questions or use one of the following examples:
  - What does lying to a patient mean?
  - What does caring mean in nursing?
  - How are competence and ethics related in nursing?

of all phenomena exists in the realm of Forms, which is beyond everyday human access. Plato believed that the realm of Forms contains the essence of concepts and objects, and even the essence of objects' properties. Essences that exist in the realm of Forms included, for example, a perfect Form of good, redness (the color red), and a horse. In the realm of Forms, the essence of good exists as ideal Truth and redness (a particular property of some objects, such as an apple) exists as the color red in its most perfect state. A horse in the realm of Forms is the perfect specimen of the animal that is a horse, and this perfect horse contains all the "horseness" factors that, for example, distinguish a horse from a cow.

Plato considered the world of Forms to be the real world, though humans do not live in that world.

The second realm is the world of Appearances, which is the everyday world of imperfect, decaying, and changing phenomena; this is the world in which humans live. The underlying purpose or goal of imperfect phenomena in the world of Appearances is to emulate their associated essences and perfect Forms. For example, a horse's purpose in life is to strive toward becoming identical to the perfect specimen of a horse that exists in the world of Forms. Plato also proposed that humans have a tripartite soul. The three parts of the soul consist of the Faculty of Reason, associated with thought and Truth, which is located in one's head; the Faculty of Spirit that expresses love, beauty, and the desire for eternal life, which is located in one's chest; and the Faculty of Appetite that is an expression of human desires and emotions, which is located in one's gut. Plato believed that the influences of these three parts of the soul exist in greater to lesser degrees in each person. Therefore, one person may be more disposed to intellectual pursuits as compared to another person, who is more interested in physical pleasures. Plato based other associations, such as one's best-suited occupation, on the degree of influence of the three parts of the soul. The founder of modern nursing, Florence Nightingale, was a passionate student of ancient Greek philosophy. It is believed that Nightingale may have aligned the function of nurses with the Faculty of Spirit (see Box 1.2).

One of Plato's most famous stories about reasoning is his allegory of the cave. In this story, a group of people lived their lives chained to the floor of a cave. Behind them burned a fire that cast shadows of people moving on the wall in front of the people who are chained. The chained prisoners believe that the shadows are actually real people. When one of the prisoners is freed from his chains, he leaves the cave. First, he is blinded by the brightness of the sun. After his sight adjusts to the light, he sees objects that he realizes are more real than the shadows within the cave. The freed person returns to the cave to encourage the other prisoners to break their chains and to enter the more expansive world of reality. The meaning of this story has been interpreted in many different ways. Whatever Plato's intended meaning,

### BOX 1.2 ETHICAL FORMATIONS: NURSES AS GUARDIANS

Plato associated the tripartite soul with three classes of Greek society. Persons were believed to have an individual aptitude that particularly suited them to their purpose in society:

1. Philosopher Kings were associated with the Faculty of Reason and wisdom.
2. Societal guardians were associated with the Faculty of Spirit and protecting others.
3. Artisans and craftsmen were associated with the Faculty of Appetite and technical work.

Because of her education in classical Greek literature and culture and her views about nursing, it has been proposed that Florence Nightingale might have compared her purpose as a nurse with the role of a societal guardian. In contrast, early physicians, whose profession developed through apprenticeship guilds that emphasized technical practices, might best be compared to the artisan class.

*Source:* LeVasseur, J. (1998). Plato, Nightingale, and contemporary nursing. *Image: Journal of Nursing Scholarship*, 30(3), 281–285.

the story does prompt people to think about the problems that result when they remain chained by their closed minds and flawed reasoning.

Plato's student, Aristotle, developed science, logic, and ethics to world-altering proportions. Though he was influenced by his teacher, Plato, Aristotle took a more practical approach to reasoning than believing in an other-worldly realm of ideal Forms. He was guided in his reasoning by his belief in the importance of empirical inquiry. He also believed that all things have a purpose or end goal (*telos*), similar to Plato's proposition that the goal of all things is to strive to be like their perfect Form. In *Nichomachean Ethics*, Aristotle (trans. 2002) discussed practical wisdom (*phronesis*) as being necessary for deliberation about what is good and advantageous if people want to move toward their human purpose or desired end goal of happiness or well-being (*eudaimonia*). Aristotle believed that a person needed education to cultivate *phronesis* to achieve intellectual excellence.

Aristotle's conception of *phronesis* is similar to Plato's conception of the virtue of prudence. Wisdom is focused on the good achieved from being wise, which means that one knows how to act in a particular situation, deliberates well, and has a disposition that embodies excellence of character. Therefore, in ancient Greece, prudence was more than simply having good intentions or meaning well—it was knowing what to do and how to be, but it also involved transforming that knowledge into well-reasoned actions. Aristotle believed that people

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- Discuss how and when nurses are and are not the guardians of their patients.
- How are nurses and physicians different in their roles as guardians? How are they similar?

#### www Ethical Reflections

- Compare Plato's allegory of the cave to critical thinking in nursing.
- Think of a few personal examples of when you have been "chained in the cave." What were the circumstances? What were the outcomes? What made a difference in your thinking?

are social beings whose reasoning should lead them to be good citizens, good friends, and to act in moderate ways.

### *The Middle Ages*

After the Roman Empire was divided by barbarians (c. 476 C.E.), the golden age of intellectualism and cultural progress in Western Europe ended. The next historical period was the Middle or Dark Ages, which lasted until about 1500 C.E. In the gap left by the failed political system of Rome, Christianity became the dominant religion in Western Europe as the Catholic Church took on the powerful role of educating the European people. Christianity is a monotheistic (one God), revelatory religion, whereas ancient Greek philosophy was based on the use of reason and polytheism (many gods). Because Greek philosophy was believed to be heretical, its examination was discouraged during the Church-dominated Middle Ages. However, it is interesting that two Catholic saints, Augustine and Aquinas, who provided the major ethical influence during the Middle Ages, were both influenced by the ancient Greeks.

St. Augustine (354–430 C.E.) is often considered to be the Plato of the Middle Ages. Though Augustine was a Christian and Plato was a non-Christian, Augustine's belief in a heavenly place of unchanging moral truths is similar to Plato's belief in the realm of ideal Forms. Augustine believed that these Truths are imprinted by God on the soul of each human being. According to Augustine, one has a duty to love God, and moral reasoning should direct one's senses in accordance with that duty; being subject to this obligation is what leads to moral perfection. Generally, St. Augustine believed only in the existence of good, similar to how the essence of good would exist if it was an ideal Form. Therefore, evil is present only when good is missing or has in some way been perverted from its existence as an ideal Truth.

Augustine was 56 years old when the Roman Empire fell. In one of his most famous writings, *The City of God*, Augustine used the fall of the Roman Empire to explain a philosophy that is sometimes compared to Plato's conception of the worlds of Forms and Appearances. People who live according to the spirit live in the City of God (world of perfection/Forms), while people who live according to the flesh live in the City of Man (world of imperfection/Appearances). To move away from evil, one must have the grace of God. Humans were viewed as finite beings that must have the divine aid of grace in order to bridge the gap required to have a relationship with the infinite being of God.

The Crusades influenced Europe's exodus from the Dark Ages. When Christians entered Islamic lands, such as Spain, Portugal, and North Africa, they were reintroduced to intellectualism, including texts of the ancient Greeks, especially Aristotle. The moral teachings of St. Thomas Aquinas (1224–1274) are sometimes viewed as a Christianized version of Aristotle's ethical teachings. Aquinas tried to reconcile Aristotle's teachings with the teachings of the Catholic Church.

Like Aristotle, Aquinas believed that people have a desirable end goal or purpose and that developing excellences of character (virtues) leads to human happiness and good moral reasoning. Aristotle's non-Christian moral philosophy was based on humans moving toward an end goal or dynamic state of *eudaimonia* (happiness or well-being) through the cultivation of excellent intellect and excellent moral character.

Aquinas expanded Aristotle's conception of the end goal of perfect happiness and grounded the requirements for happiness in the knowledge and love of God and Christian virtues. Aquinas replaced Aristotle's emphasis on the virtue of pride with an emphasis on the virtue of humility. Aristotle believed that pride is an important characteristic of independent, strong men, while Aquinas valued the characteristic of humility because it represented to him one's need to depend on the benevolence of God. In addition to virtue ethics, Aquinas is associated with a belief in reasoning according to the natural law theory of ethics. Both of these ethical approaches are covered later in this chapter.

### Modern Philosophy and the Age of Enlightenment

The period of modern philosophy began when the major intellectual force during the Middle Ages, the Catholic Church, began to have a diminishing influence within society, while the influence of science began to increase. The scientific revolution began in 1543 with the Copernican theory but did not rapidly advance until the 17th century, when Kepler and Galileo moved scientific debates to the forefront of society.

With these changes came a new freedom in human moral reasoning, which was based on people being autonomous, rational-thinking creatures rather than primarily being influenced and controlled by Church dogma and rules. During the 18th-century Enlightenment era, humans believed that they were coming out of the darkness of the Middle (Dark) Ages into the light of true knowledge.

Some scientists and philosophers were bold enough to believe that humans could ultimately be perfected and that all knowledge would be discovered. As the belief in empirical science grew, a new way of thinking was ushered in that compared both the universe and people to machines. Many scientists and philosophers believed that the world, along with its inhabitants, could be reduced through analyses into their component parts. These reductionists hoped that after most or all knowledge was discovered, the universe and human behavior could be predicted and controlled. People still demonstrate evidence of this way of thinking in health care today when *cure* is highly valued over *care*, and uncertainty is considered to be something that can be, or needs to be, eliminated in regard to health and illness. A **mechanistic approach** is one that focuses on fixing problems as if one is fixing a

#### www Ethical Reflections

- Identify examples of mechanistic practices in health care.
- Are all mechanistic healthcare practices bad? Why or why not?

machine, as contrasted to a humanistic or holistic approach, in which one readily acknowledges that well-being and health occur along a complex continuum and that some situations and health problems cannot be predicted, fixed, or cured.

During the 18th century, David Hume (1711–1776) proposed an important idea about moral reasoning. Hume argued that there is a distinction between facts and values when moral reasoning is practiced. This *fact/value distinction* also has been called the *is/ought gap*. A skeptic, Hume suggested that a person should not acknowledge a fact and then make a value judgment based on that fact, as one logically cannot take a fact of what *is* and then determine an ethical judgment of what *ought to be*. If Hume’s position is accepted as valid, people should not make assumptions such as: (a) if all dogs have fleas (assuming that this is a known fact), and (b) Sara is a dog (a fact), therefore, (c) Sara ought not be allowed to sleep on the sofa because having fleas on the sofa is a bad thing (a value statement). According to people who believe in the truth of the fact/value distinction, the chance of Sara spreading her fleas to the sofa might be a fact if she sleeps on it, but determining that having fleas on the sofa is a bad thing is based only on one’s feelings.

### *Postmodern Era*

After the scientific hegemony of the Enlightenment era, people began to question whether a single-minded allegiance to science was creating problems for human societies. Postmodernism often is considered to have begun around 1950, after the end of World War II. However, some people trace its beginnings back to the German philosopher Friedrich Nietzsche in the late 1800s. Pence (2000) defined **postmodernism** as “a modern movement in philosophy and the humanities that rejects the optimistic view that science and reason will improve humanity; it rejects the notion of sustained progress through reason and the scientific method” (p. 43). The postmodern mind is one that is formed by a pluralistic view, or a diversity of intellectual and cultural influences. People who live according to a postmodern philosophy acknowledge that reality is constantly changing and that scientific investigations cannot provide one grand theory or correct view of an absolute Truth that can guide human behavior, relationships, and life. Human knowledge is thought instead to be shaped by multiple factors, with storytelling and narrative analysis being viewed as core components of knowledge development.

### *Care-Based Versus Justice-Based Reasoning*

A care approach to moral reasoning often is associated with a feminine way of thinking, and a cure approach is usually associated with a masculine, Enlightenment-era way of thinking. In 1981, Lawrence Kohlberg, a psychologist,

reported his landmark research about moral reasoning based on 84 boys that he had studied for over 20 years. Based on the work of Jean Piaget, Kohlberg defined 6 stages of moral development ranging from childhood to adulthood. Interestingly, Kohlberg did not include any women in his research, but he expected that his 6-stage scale could be used to measure moral development in both males and females.

When the scale was applied to women, they seemed to score only at the third stage of the sequence, a stage in which Kohlberg described morality in terms of interpersonal relationships and helping others. Kohlberg viewed this third stage of development as somewhat deficient in regard to mature moral reasoning. Because of Kohlberg's exclusion of females in his research and his negative view of this third stage, one of Kohlberg's associates, Carol Gilligan, raised the concern of gender bias. Gilligan, in turn, published an influential book in 1982, *In a Different Voice*, in which she argued that women's moral reasoning is different, but it is not deficient. The distinction that is usually made between moral reasoning as it is suggested by Kohlberg and Gilligan is that Kohlberg's is a male-oriented ethic of justice and Gilligan's is a more feminine ethic of care (covered later in this chapter).

### *Learning from History*

Often, it is only in hindsight that people are able to analyze a historical era in which there is a converging of norms and beliefs that are held in high esteem or valued by large groups within a society. Like the overlapping approaches used by some ethical objectivists, the influences of historical eras also build upon each other and often are hard to separate. Christians still base much of their ethical reasoning on the philosophy generated during the Middle Ages. At the same time, it is evident that individualistic ways of thinking that were popular during the Enlightenment era remain popular today in Western societies because autonomy (self-direction) is so highly valued. The varied historical influences that have affected moral reasoning, consequently, have formed a pattern of rich and interesting values, perspectives, and practices that are evident in the globally connected world that people live in today.

## Ethical Theories and Approaches

Normative ethical theories and approaches function as moral guides to answer the questions, "What ought I do or not do?" and "How should I be?" A theory can provide individuals with guidance in moral thinking and reasoning, as well as provide justification for moral actions. The following theories and approaches are not all-inclusive, nor do they necessarily include all variations of the theories and approaches that are discussed.

## Western Ethics

### Virtue Ethics

*Watch your thoughts; they become words.*

*Watch your words; they become actions.*

*Watch your actions; they become habits.*

*Watch your habits; they become character.*

*Watch your character; it becomes your destiny.*

—FRANK OUTLAW

Rather than centering on what is right or wrong in terms of one's duties or the consequences of one's actions, the excellence of one's character and considerations of what sort of person one wants to be is emphasized in **virtue ethics**. Since the time of Plato and Aristotle, virtues, called *arête* in Greek, have referred to excellences in regard to persons or objects being the best that they can be in accordance with their purpose. As the ancient Greeks originally conceived the concept, even an inanimate object can have virtue. For example, the purpose of a knife is to cut, so *arête* in regard to a knife means that the knife has a sharp edge that cuts very well. If one needs the services of a knife, it is probably safe to assume that a knife that exhibits excellence in cutting would be the type of knife that one wants to use; most people want to use a knife that accomplishes its purpose in the best way possible.

For humans, virtue ethics addresses the question, "What sort of person must I be to be an excellent person?" rather than "What is my duty?" **Virtues** for humans are habitual, excellent traits that are intentionally developed throughout one's life. A person of virtue, consistent with Aristotle's way of thinking, is a person who is an excellent friend to other people, an excellent thinker, and an excellent citizen of a community.

Aristotle's (trans. 2002) approach to virtue ethics is grounded in two categories of excellence: intellectual virtues and character or moral virtues. According to Aristotle, "the intellectual sort [of virtue] mostly . . . comes into existence and increases as a result of teaching (which is why it requires experience and time), whereas excellence of character results from habituation" (p. 111). The habituation that Aristotle had in mind is an intelligent, mindful attention to excellent habits, rather than a thoughtless routinization of behaviors.

Though Aristotle divided virtues into two sorts—those of the intellect and those of character—the two categories of virtues cannot be distinctly separated. Aristotle made this point by proposing that "it is not possible to possess excellence in the primary sense [that is, having excellence of character] without wisdom, nor to be wise without excellence of character" (p. 189).

Aristotle realized that good things taken to an extreme could become bad. He therefore proposed that there is a "Golden Mean" in ways of being. Most virtues

are considered to exist as a moderate way of being between two kinds of vices or faults: the extremes of excess at one end and deficiency on the other. For instance, Aristotle named courage as a virtue, but the extremes of rashness at one end of a continuum and cowardice at the other end of the same continuum are its related vices. Another example is the virtue of truthfulness, which is the mean between boastfulness and self-deprecation. The mean for each virtue is unique for each type of virtue and situation; in other words, the mean is not a mathematical average that is consistent for all virtues.

Other examples of virtues include benevolence, compassion, fidelity, generosity, and patience. Plato designated the four virtues of prudence (wisdom), fortitude (courage), temperance (moderation), and justice as cardinal virtues, meaning that all other virtues hinge on these primary four. Prudence corresponds to Plato's idea of the Faculty of Reason, fortitude corresponds to the Faculty of Spirit, and temperance corresponds to the Faculty of Appetite; the virtue of justice is an umbrella virtue that encompasses and ties together the other three.

The ancient Greeks most frequently are associated with virtue ethics, but other philosophers and ethicists also have proposed views about virtues. The Scottish philosopher David Hume (1711–1776) and the German philosopher Frederick Nietzsche (1844–1900) each proposed an interesting philosophy of virtue ethics that differs from the philosophies of the Greeks, though Hume's and Nietzsche's are not the only other approaches to virtue ethics.

Hume, whose approach is used by some feminist philosophers, believed that virtues flow from a natural human tendency to be sympathetic or benevolent toward other people. Virtues are human character traits that are admired by most people and are judged to be generally pleasing, as well as being useful to other people, useful to oneself, or useful to both other people and to oneself. Because of Hume's focus on the usefulness of virtues, his approach to ethics also is associated with utilitarianism, which is discussed later in this chapter. Hume's philosophy of ethics is based on emotion as the primary human motivator for admirable behavior, rather than motivation by reason. However, Hume did not propose that ethics is based merely on personal opinion. Virtuous behavior is validated by the consensus of members of communities according to what is useful for a whole community's well-being.

A different and more radical view of virtue ethics is based on the philosophy of Nietzsche. Rather than viewing people as caring, sympathetic beings, Nietzsche proposed that the best character for people to cultivate is based on a "will to power." Nietzsche believed that the "will to power" rightly should motivate people to achieve dominance in the world. Strength was praised as virtuous whereas "feminine" virtues, such as caring and kindness, were considered by Nietzsche to be signs of weakness. This means that, according to Nietzsche, virtue is consistent with hierarchical power or power over other people, which makes the Christian virtue

## Ethical Reflections

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- Do you believe that a specific set of virtues can be identified as being essential for the nursing profession?
- If so, what are the virtues contained in the set? Why did you select them? Why are other virtues excluded?
- If you do not believe that a specific set of virtues is identifiable, defend your position.
- Partner with a colleague and list several real-life examples that are related to each line of Frank Outlaw's quotation at the beginning of the *Virtue Ethics* section.
- What do you believe might be legitimate criticisms of virtue ethics?

of humility a vice. It is believed that another German, Adolph Hitler, adopted the philosophy of Nietzsche as his worldview. Though Nietzsche is a well-known and important person in the history of philosophy, Nietzsche's approach to virtue ethics has little place in nursing ethics.

Although virtue ethics is again popular today, over the years, interest in this ethical approach experienced a significant decline among Western philosophers and nurses (MacIntyre, 1984; Tschudin, 2003). Many Western philosophers lost interest in the virtues when they became entrenched in the schools of thought popularized during the Enlightenment era that emphasize individualism and autonomy (MacIntyre, 1984).

Over time, nurses concluded that it was unfashionable to follow the tradition of Florence Nightingale because Nightingale's view of virtues in nursing included a virtue of obedience (Sellman, 1997). However, Nightingale's valuing of obedience needs to be viewed within the context of the time in which she lived. Also, Nightingale's liberal education in Greek philosophy may have influenced her use of the virtue of obedience to reflect her belief in the value of practical wisdom as conceived by Aristotle (LeVasseur, 1998; Sellman, 1997). In connecting obedience to practical wisdom, some nurses now understand that Nightingale's conception was one that approached something akin to intelligent obedience, rather than a subservient

allegiance of nurses to physicians.

### Natural Law Theory

*There is in fact a true law—namely, right reason—which is in accordance with nature, applies to all men, and is unchangeable and eternal. By its commands this law summons men to the performance of their duties; by its prohibitions it restrains them from doing wrong. . . .*

—MARCUS TULLIUS CICERO, *THE REPUBLIC* (51 B.C.E.)

Natural law theory has a long and varied history, dating back to the work of Plato and Aristotle. In fact, attempting to present its essence would be to oversimplify the theory (Buckle, 1993). Even the terms *nature* and *natural* are ambiguous. Most modern versions of natural law theory have their basis in the religious philosophy of St. Thomas Aquinas. People who use natural law theory believe that the rightness of actions is self-evident because morality is inherently determined by nature, not by customs and preferences. According to this theory, the law of reason is

implanted in the order of nature, and this law provides the rules or commands for human actions.

Though natural law theory and divine command theory sometimes are confused, they have a fundamental difference. According to divine command theory, an action is good because a divine being, such as God, commands it, whereas with natural law theory, a divine being commands an action because it is moral irrespective of said divine being. However, natural law theory is often associated with rule-based Judeo-Christian ethics, and it is the basis for religious prohibitions against acts that some people consider *unnatural*, such as homosexuality and the use of birth control.

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Ethical Reflections

- What do you believe might be legitimate criticisms of a natural law approach to ethics?

## Deontology

**Deontology**, literally the “study of duty,” is an approach to ethics that is focused on duties and rules. The most influential philosopher associated with the deontological way of thinking was Immanuel Kant (1724–1804). Kant defined a person as a rational, autonomous (self-directed) being with the ability to know universal, objective moral laws and the freedom to decide to act morally. **Kantian deontology** prescribes that each rational being is ethically bound to act only from a sense of duty; when deciding how to act, the consequences of one’s actions are considered to be irrelevant.

According to Kant, it is only through dutiful actions that people can be moral. Even when individuals do not want to act from duty, Kant believed that they are ethically bound to do so. In fact, Kant asserted that having one’s actions motivated by duty is superior to acting from a motivation of love. Because rational choice is within one’s control, as compared to one’s tenuous control over personal emotions, Kant was convinced that only reason, and not emotion, is sufficient to lead a person to moral actions.

Kant believed that people are ends in themselves and should be treated accordingly. Each autonomous, self-directed person has dignity and is due respect, and one should never act in ways that involve using other people as a means to one’s personal ends. In fact, when people use others as a means to an end, even if they believe that they are attempting to reach ethical goals, Kant believed that people could be harmed. An example of this today is the failure to obtain informed consent from a research participant even when the researcher steadfastly believes that the research will be beneficial to the participant.

Kant identified rules to guide people in thinking about their obligations. He drew a distinction between two types of duties or obligations: the hypothetical imperative and the categorical imperative. Hypothetical imperatives are optional duties or rules that people ought to observe or follow if certain ends are to be achieved. Hypothetical imperatives are sometimes called *if-then imperatives*, which

means that they involve conditional or optional actions; for instance, “If I want to become a nurse, then I have to graduate from nursing school.”

However, where moral actions are concerned, Kant believed that duties and laws are absolute and unconditional. Kant proposed that people ought to follow a universal, unconditional framework of maxims, or rules, as a guide to know the rightness of actions and one’s moral duties. He called these absolute and unconditional duties *categorical imperatives*. When deciding about matters of ethics, one should

act according to a categorical imperative and ask the question: “If I perform this action, could I will that it should become a universal law for everyone to act in the same way?” No action can ever be judged as right, according to Kant, if it is not reasonable that the action could be used as a binding, ethical law for all people. For example, Kant’s ethics imposes the categorical imperative that one should never tell a lie, because a person cannot rationally wish that all people should be able to pick and choose when they have permission not to be truthful. Another example of a categorical imperative is that suicide is never acceptable. A person, when committing suicide, should not rationally wish that all people should feel free to commit suicide, or the world would become chaotic.

### Consequentialism

Consequentialists, as distinguished from deontologists, do consider consequences to be an important indication of the moral value of one’s actions. Utilitarianism is the most well-known consequentialist theory of ethics. Utilitarianism means that actions are judged by their utility; that is, they are evaluated according to the usefulness of their consequences. When people use the theory of **utilitarianism** as the basis for ethical behavior, they attempt to promote the greatest good (happiness or pleasure) and to produce the least amount of harm (unhappiness, suffering, or pain) that is possible in a situation. In other words, utilitarians believe that it is useful to society to

achieve “the greatest good for the greatest number” of people who may be affected by an action.

The British philosopher Jeremy Bentham (1748–1832), a contemporary and associate of Florence Nightingale’s father, was an early promoter of the principle of utilitarianism. During Bentham’s life, British society functioned according to aristocratic privilege. Poor people were mistreated by people in the upper classes and were given no choice other than to work long hours in deplorable conditions. Bentham tried to develop a theory that could be used to achieve a fair distribution of pleasure among all British citizens. He went as far as to develop a systematic decision-making method

### Ethical Reflections



- Are there categorical imperatives (absolute duties) that nurses must follow to be ethical professionals? If so, identify examples. If not, defend your answer.
- Answer the following question and provide philosophical support for your answer: Is it more important for a nurse to have a virtuous character or to be dutiful?
- Review the ANA’s (2001) *Code of Ethics* in the appendix. Is the code based on a deontological approach to nursing? Is it based on a virtue ethics approach? Discuss specific examples in the code that support your answers.
- What do you believe might be legitimate criticisms of deontological ethics?

using mathematical calculations. Bentham's method was designed to determine ways to allocate pleasure and to diminish pain by using the measures of intensity and duration, though his approach to utilitarianism has been criticized because he equated all types of pleasure as being equal.

Another Englishman, John Stuart Mill (1806–1873), challenged Bentham's views when he clearly pointed out that particular experiences of pleasure and happiness do have different qualities, and that different situations do not necessarily produce equal consequences. For example, Mill stated that the higher intellectual pleasures may be differentiated from lower physical pleasures. The higher pleasures, such as enjoying a work of art or a scholarly book, are considered to be better because only human beings, not other animals, possess the mental faculties to enjoy this higher level of happiness.

According to Mill, happiness and pleasure are measured by quality and not quantity (duration or intensity). In making these distinctions between higher and lower levels of happiness and pleasure, Mill's philosophy is focused more on ethics than politics and social utility: each person's happiness is equally important.

Mill believed that communities usually agree about what is good and about the things that best promote the well-being of the most people. An example of an application of Mill's utilitarianism is the use of mandatory vaccination laws—individual liberties are limited so that the larger society is protected from diseases, and the consequence is that people generally are happier because they are free of diseases. People using Mill's form of utilitarian theory often can use widely supported traditions to guide them in deciding about rules and behaviors that probably will produce the best consequences for the most people, such as the maxim that stealing is wrong. Through experience, humans have generally identified many behaviors that will produce the most happiness or unhappiness for society as a whole.

Over time, people subscribing to a theory of utilitarianism generally have divided themselves into subgroups. Two types of utilitarianism that have developed over the years are rule utilitarianism and act utilitarianism. **Rule utilitarians** believe that there are certain rules—such as do not kill, do not break promises, and do not lie—that, when followed, generally create the best consequences for the most people. Based on this definition, someone might ask, “What is the difference between rule utilitarianism and deontology?” The answer is that all utilitarian theories of ethics, whether based on rules or individual actions, are predicated on achieving good consequences for the most people. Deontologists, on the other hand, make decisions based on right duty rather than on right consequences.

**Act utilitarians** believe that each action in a particular circumstance should be chosen based on its likely good consequences rather than on following an inherently moral, universal rule. The utility of each action in achieving the most happiness is the aim of act utilitarians, while rule utilitarians are willing to accept causing more suffering than happiness in a particular situation to avoid violating a generalized rule. For example, promise-breaking is permitted according to act utilitarianism if

## Ethical Reflections

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- Achieving the greatest good for the greatest number of people is an essential principle of public health nursing. Can you identify examples of utilitarian ethics in the ANA's (2001) *Code of Ethics for Nurses* in the appendix? If so, list examples.
- Identify specific situations in which nurses need to use a utilitarian approach to nursing care.
- What do you believe might be legitimate criticisms of utilitarian or consequentialist ethics?

the consequences of the action (breaking a promise) cause more happiness than suffering in a particular situation. In the same situation, a rule utilitarian would say that a promise should be upheld because, in most cases, promise-keeping causes more happiness than suffering.

### Prima Facie Rights

The term *prima facie* means that on one's first impression ("on the face of things"), something is accepted as correct until or unless it is shown to be otherwise. For example, promise-keeping is considered to be an accepted ethical rule. However, if a nurse had promised her spouse that she would be on time for dinner, but as she was about to leave the hospital she was told that the nurse replacing her will be late for work, it is expected that the nurse would break her promise to be on time for dinner so that she could attend to her patients until the other nurse arrives.

*Prima facie* ethics is associated with the philosopher Sir William David Ross (1877–1971) and his 1930 book, *The Right and the Good*. Ross is called an ethical intuitionist because he

believed that certain things are intrinsically good and self-evidently true. Ross understood ethics to suggest that certain acts are *prima facie* good: keeping promises, repaying kindnesses, helping others, and preventing distress. However, when these *prima facie* good actions conflict, one has to decide where one's actual duty lies. Ross conceded that human knowledge is imperfect and that the best that people can expect to do is to use their imperfect knowledge to assess the context of each situation and to make an informed judgment, although they are uncertain about the correctness of their choices.

Ross's approach to ethics has quite a bit of relevance for nurses, who frequently must make quick determinations of how to prioritize important actions that can cause distress for one person while helping another. See Box 1.3 for a case example.

### Principlism

**Principles** are rule-based criteria for conduct that naturally flow from the identification of obligations and duties. Consequently, the theory of deontology, discussed earlier in this chapter, is a forerunner of the approach of principlism. Principles usually are reducible to concepts or statements, such as the principle of beneficence or the respect for a person's autonomy. Principles often are used as the basis for ethically related documents, such as documents that reflect positions about human rights. Examples of principle-based documents include the American Hospital Association's (2003) "The Patient Care Partnership" and the Universal Declaration

**BOX 1.3 ETHICAL FORMATIONS: PRIMA FACIE RIGHTS**

Suzie has been Mrs. G.'s nurse for several years because Mrs. G. frequently is admitted to the hospital where Suzie works. Suzie and Mrs. G. have developed a close relationship based on trust and respect. During this admission, Mrs. G.'s condition has been deteriorating, and she has elected to initiate a Do Not Attempt Resuscitation (DNAR) order. Today, she is experiencing agonal breathing and is nearing death. On a number of occasions, Mrs. G. stated that she is scared of dying and asked Suzie to promise to be with her when she dies, if she is working at the time. Mrs. G.'s daughter is scared and alone with Mrs. G. in her hospital room. While Mrs. G. progresses toward an imminent death, Suzie's newly post-operative patient suddenly and unexpectedly has a seizure and experiences a respiratory arrest and circulatory collapse. Suzie just met this patient when he returned from surgery earlier in the morning. The patient's wife is hysterical. As the patient's primary nurse, Suzie begins to go into action caring for the post-op patient and coordinating the Code Blue. A nursing assistant comes to Suzie and tells her that Mrs. G. is about to die.

- What should Suzie do?
- Explain the rationale for your decision.

of Human Rights, formulated in 1948 by the United Nations. Because principlism is so popular in the field of bioethics, this approach is discussed in Chapter 2.

### Casuistry

Casuistry is an approach to ethics that is based in Judeo-Christian history. When people use **casuistry**, they make decisions inductively based on individual cases. The analysis and evaluation of strongly similar or outstanding cases (i.e., paradigm cases) provides guidance in ethical decision making. When people use casuistry, their ethical decision making begins as a bottom-up approach considering the details of specific cases, rather than beginning from the top down and applying absolute rules and principles. Long ago, Jewish people often tried to sort out the relevance of sacred laws in specific situations in ways that were practical and case based rather than absolute and inflexibly rule based. In Catholic history, the practice of persons individually confessing their sins to priests to receive absolution reflects the use of casuistry. Based on the confessor's specific case (i.e., the circumstances surrounding the occasion of sinning) a person receives a personal penance from the priest that is required for absolution.

Today, casuistry is often the method used by healthcare ethics committees to analyze the ethical issues surrounding specific patient cases. The Four Topics

#### Ethical Reflections

- Conduct an Internet search for landmark cases in healthcare ethics.
- Summarize two important cases.
- How have these two cases affected subsequent healthcare ethics decisions and debates?
- What do you believe might be legitimate criticisms of casuistry as an approach to ethics?

Method of ethical decision making that is discussed in Chapter 2 is based on a casuistry approach.

## Narrative Ethics

*There are stories and stories. There are the songs, also, that are taught. Some are whimsical. Some are very intense. Some are documentary. Everything I have known is through teachings, by word of mouth, either by song or by legends.*

—TERRANCE HONVANTEWA, HOPI (AS CITED IN CLEARY, 1996, P. 40)

Because it is a story-based approach, narrative ethics has similarities to casuistry. Also, according to one of the foremost modern-day virtue ethicists, Alasdair MacIntyre (1984), narrative thinking and virtue ethics are closely connected. Both narrative ethics and virtue ethics are firmly embedded in human relationships. MacIntyre proposed that a human is “essentially a story-telling animal”; a person is “a teller of stories that aspire to truth” (p. 216). Narratives, such as novels and literary stories, change us in remarkable ways (Murray, 1997). Most people from childhood obtain moral education about character development from stories such as fairy tales and fables. When using a **narrative** approach to ethics, nurses are open to learning from a storied, nuanced view of life; that is, they are sensitive to how personal and community stories evolve, are constructed, and can be changed. Narratives are stories that are being lived, read, watched, heard, discussed, analyzed, or compared.

Narratives are very context or situation bound. For people to decide what they should do in particular circumstances, they may first identify how their moral character and actions fit within the greater stories of their culture. People are situated within their personal life narratives and their stories intersect with and are interwoven into the narratives of other people with whom they interact. Nurses who use narrative ethics are aware that there is much more to a patient’s story than is usually known or discussed among healthcare providers. People are not solitary creatures, and as they interact with other people and their environment, they must make choices about what they believe and how they will act. They create their own stories.

When using a narrative approach to ethics, nurses realize that individual human stories are being constantly constructed in relation to the stories of a greater community of people. In nursing, a good example of narrative ethics involves nurses

### Ethical Reflections

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Discuss several specific stories in books and movies that have affected your moral views.

Obtain a copy of one or all of the following children’s books:

- “The Three Questions” by Jon J. Muth
- “Stone Soup” by Jon J. Muth
- An original edition of “The Little Engine that Could” by Watty Piper
- “Old Turtle” by Douglas Wood

Identify themes and symbolism in the story.

Apply the themes and symbolism to nursing, including the nursing meta-paradigm of person, health, environment, and nursing.

As much as possible, apply the information in Chapter 1 to these stories.

- What do you believe might be legitimate criticisms of a narrative approach to ethics?

encountering each patient's unfolding life story in everyday practice with sensitive awareness. These nurses know that their actions while caring for patients influence the unfolding stories of those patients in both large and small ways. A "narrative approach to bioethics focuses on the patients themselves: these are the moral agents who enact choices" (Charon & Montello, 2002, p. xi). In narrative ethics, patients' and nurses' stories matter; however, no one story should be accepted without critical reflection.

## Critical Theory

**Critical theory**, sometimes referred to as critical social theory, is a broad term that identifies theories and worldviews that address the domination perpetrated by specific powerful groups of people and the resulting oppression of other specific groups of people. There are a number of different critical theories that are included under the one broad heading. In citing the group of German philosophers who originated the concept of critical theory, Bohman (2005) stated that critical theories can be distinguished from traditional theories because the purpose of critical theories is to promote human emancipation. Specifically, the purpose of using critical theories is "to liberate human beings from the circumstances that enslave them" (Horkheimer, 1982, p. 244, as cited in Bohman, 2005, para. 1).

According to Brookfield (2005), there are three core assumptions in critical theory that explain how the world is organized. Critical theory purports:

1. That apparently open, Western democracies are actually highly unequal societies in which economic inequity, racism, and class discrimination are empirical realities.
2. That the way this state of affairs is reproduced and seems to be normal, natural, and inevitable (thereby heading off potential challenges to the system) is through the dissemination of dominant ideology.
3. That critical theory attempts to understand this state of affairs as a necessary prelude to changing it. (p. viii)

One critical theory that is widely used by nurses is a feminist approach to ethics. Under this broad feminist approach is the ethic of care that originated from the Gilligan–Kohlberg debate that was discussed earlier in this chapter.

## Feminist Ethics

According to Tong (1997), "to a greater or lesser degree, all feminist approaches to ethics are filtered through the lens of gender" (p. 37). This means that **feminist ethics** is specifically focused on evaluating ethically related situations in terms of how these


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### Ethical Reflections

- In what areas of nursing can critical theory be applied? To which populations?
- What do you believe might be legitimate criticisms of using a critical theory approach to ethics?
- Do you believe that *caring* is a virtue? Support your answer.

situations affect women. The concept of feminist ethics tends to have a political connotation and addresses the patterns of women's oppression as this oppression is perpetrated by dominant social groups, especially socially powerful men.

An ethic of care is grounded in the moral experiences of women and feminist ethics. It evolved into an approach to ethics that gained popularity because of the Gilligan–Kohlberg debate about the differences in women's and men's approaches to moral reasoning. Rather than being based on duty, fairness, impartiality, or objective principles (ethic of justice) similar to the values that were popularized during the Enlightenment era, an **ethic of care** emphasizes the importance of traditionally feminine traits such as love, compassion, sympathy, and concern about the well-being of other people. The natural partiality in how people care more about some people as compared to others is acknowledged as being acceptable in an ethic of care. Also, the role of emotions in moral reasoning and behavior is accepted as being a necessary and natural complement to rational thinking. This position distinguishes an ethic of care from an ethic of justice and duty-based ethics that emphasize the preeminence of reason and minimize the importance of emotion in guiding moral reasoning and the moral nature of one's relationships.

### *Eastern Ethics*

Ethics in Asian societies has similarities to and important differences from Western ethics. In both cultures, ethics often is intertwined with spiritual or religious thinking, but ethics in Eastern societies is usually indistinguishable from general Eastern philosophies. Both Eastern and Western philosophies of ethics examine human nature and what is needed for people to move toward well-being. However, some of the differences in the two cultural systems are quite interesting and distinct.

Whereas the goal of Western ethics is generally for people to achieve self-direction and to understand themselves personally, the goal of Eastern ethics often is to understand universal interconnections (see Box 1.4), to be liberated from the self, or to understand that people really do not consist of a self at all (Zeuschner, 2001). Ethics viewed from Christian or other theological perspectives tends to be based on a belief in human flaws that require an intermediary (God) to transcend these imperfections. Eastern ethical systems usually are focused on individuals' innate but unrecognized perfection and the ability to transcend earthly suffering and dissatisfaction through one's own abilities. Therefore, Eastern ethics is not imposed from outside of a person, but instead is imposed from within oneself. Eastern ethics tends to be a discipline of training the mind, and unethical behavior leads to karmic results (i.e., the quality of one's actions results in fair consequences according to the universal law of cause and effect). The four largest Eastern ethical systems, which contain myriad variations and now exist in a number of different countries, are Indian ethics (Hinduism and Buddhism) and Chinese ethics (Taoism and Confucianism).

## Indian Ethics

### Hinduism

Hinduism is an ancient ethical system. It originated with writings called the Vedas (c. 2000 to 1000 B.C.E.), which include magical, religious, and philosophical teachings, that existed long before the well-known ethical philosophy of the ancient Greeks. The main emphasis in Hindu ethics is cosmic unity.

Because of reincarnation, people are stuck in *maya*, an illusory, everyday, impermanent experience. The quality of one's past actions, *karma*, influences one's present existence and future incarnations or rebirths. Therefore, people need to improve the goodness of their actions, which will subsequently improve their karma. Liberation, *moksha*, means that the soul of each person is no longer reincarnated but becomes one with the desirable cosmic or universal self, *atman*, and the absolute reality of *Brahman*.

### Buddhism

The historical Buddha, Siddhartha Gautama (6th century B.C.E.) was a Hindu prince. Because Siddhartha's father wanted to prevent the fulfillment of a prophecy that Siddhartha might become a spiritual teacher, he tried to shield his son from the world outside of his palace. However, Siddhartha left the confinement of his palace and saw in his fellow human beings the suffering associated with sickness, old age, and death. He decided to devote his life to understanding and ending suffering.

The Buddha's core teachings, the teachings that all Buddhist sects profess, are called the Four Noble Truths. The First Noble Truth is that unsatisfactoriness or suffering (*dukkha*) exists as a part of all forms of existence. This suffering is different from the common Western notion of physical or mental misery; suffering in a Buddhist sense, for example, arises when people are ego-centered and cling to their impermanent existence and impermanent things. Suffering is emphasized in Buddhism, not to suggest a negative outlook toward life but instead as a realistic assessment of the human condition. The Second and Third Noble Truths suggest

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Ethical Reflections

- How is the story about the Net of Indra in Box 1.4 related to ethics?

#### BOX 1.4 ETHICAL FORMATIONS: THE NET OF INDRA

The Buddhist Avatamsaka Sutra contains a story about how all perceiving, thinking beings are connected in a way that is similar to a universal community. The story is about the heavenly net of the god Indra. "In the heaven of Indra, there is said to be a network of pearls, so arranged that if you look at one you see all the others reflected in it. In the same way each object in the world is not merely itself but involves every other object and in fact is everything else. In every particle of dust there is present Buddhas without number."

—Sir Charles Eliot, as cited in Capra, 1999

that the cause of suffering is attachment (clinging or craving) to impermanent things and that suffering can be transcended (enlightenment). The Fourth Noble Truth contains the path for transforming suffering into enlightenment or liberation. This path is called the Eightfold Path, and it is composed of eight right practices: Right View, Right Thinking, Right Mindfulness, Right Speech, Right Action, Right Diligence, Right Concentration, and Right Livelihood.

Because of the central place of virtues in Buddhist philosophy, one interpretation of Buddhist ethics is to identify Buddhism as an ethic of virtue. There are four virtues that are singled out by Buddhists as being immeasurable because, when these virtues are cultivated, it is believed that they will grow in a way that can encompass and transform the whole world. The Four Immeasurable Virtues are compassion (*karuna*), loving-kindness (*metta*), sympathetic joy (*mudita*), and equanimity (*upekkha*).

### Chinese Ethics

The two most influential Chinese ethical systems were developed between 600 and 200 B.C.E. during a time of social chaos in China. The two systems are Taoism and Confucianism.

#### Taoism

The beginning of Taoism is attributed to Lao-tzu (c. 571 B.C.E.), who wrote the Taoist guide to life, the *Tao Te Ching*. The word *Tao* is translated in English as *way* or *path*, meaning the natural order or harmony of all things. Like Buddhists, Taoists do not believe in a creator God. Instead, Taoists have a very simple perspective toward reality—the underlying purpose of humans and the underlying purpose of nature cannot be separated. Based on the cyclic nature of life observed by ancient Chinese farmers, Taoist philosophy underscores the flux and balance of nature through *yin* (dark) and *yang* (light) elements. Living well or living ethically is living authentically, simply, and unselfishly in harmony and oneness with nature.

#### Confucianism

K'ung Fu-tzu (551–479 B.C.E.), who was later called Confucius by Christians visiting China, originated the Confucian ethical system. The teachings of Confucian ethics are generally contained in the moral maxims and sayings attributed to K'ung Fu-tzu, along with the later writings of his followers. Confucian ethics is described through the concepts of *li* and *yi* (Zeuschner, 2001). *Li* provides guidance in regard to social order and how humans should relate to one another, including rules of etiquette, such as proper greetings and social rituals. *Yi* emphasizes the importance of one's motivations toward achieving rightness rather than emphasizing consequences. Sincerity, teamwork, and balance are critically important to ethical behavior. The primary virtue of Confucian ethics is *jen*, which is translated in English as benevolence or human goodness. Overall, Confucianism is a communitarian ethical system in which social goals, the good of society, and the importance of human relationships are valued.

## KEY POINTS

- Ethics refers to the analysis of matters of right and wrong, whereas morals refer to actual beliefs and behaviors. However, the terms often are used interchangeably.
- Values refer to judgments about what one believes is good or what makes something desirable. Values influence how a person's character is developed and how people think and subsequently behave.
- Normative ethics is an attempt to decide or prescribe values, behaviors, and ways of being that are right or wrong, good or bad, admirable or deplorable. When doing normative ethics, people ask questions such as: How ought humans behave? What should I do? and What sort of person should I be?
- Ethical thinking, valuing, and reasoning generally fall along a continuum between ethical relativism and ethical objectivism.
- The study of values and ways of moral reasoning throughout history can be useful for people living in the 21st century. Specific values and ways of moral reasoning tend to overlap and converge over time.
- Virtue ethics emphasizes the excellence of one's character.
- Deontological ethics emphasizes one's duty rather than the consequences of one's actions.
- Utilitarian ethics emphasizes the consequences of one's actions in regard to achieving the most good for the most people that may be affected by a rule or action.
- Eastern philosophies and systems of ethics often are inseparable.

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