

What Is Morality?

We are discussing no small matter, but how we ought to live.

SOCRATES, IN PLATO'S *REPUBLIC* (ca. 390 B.C.)

1.1. The Problem of Definition

Moral philosophy is the study of what morality is and what it requires of us. As Socrates said, it's about "how we ought to live"—and why. It would be helpful if we could begin with a simple, uncontroversial definition of what morality is, but that turns out to be impossible. There are many rival theories, each expounding a different conception of what it means to live morally, and any definition that goes beyond Socrates's simple formulation is bound to offend at least one of them.

This should make us cautious, but it need not paralyze us. In this chapter, I will describe the "minimum conception" of morality. As the name suggests, the minimum conception is a core that every moral theory should accept, at least as a starting point. First, however, we will examine some moral controversies having to do with handicapped children. Our discussion will bring out the features of the minimum conception.

1.2. First Example: Baby Theresa

Theresa Ann Campo Pearson, an infant known to the public as "Baby Theresa," was born in Florida in 1992. Baby Theresa had anencephaly, one of the worst genetic disorders. Anencephalic infants are sometimes referred to as "babies without brains," but that is not quite accurate. Important parts of the brain—the cerebrum and cerebellum—are missing, as is the top of the skull. The brain stem, however, is still there, and so the baby can still breathe and possess a heartbeat. In the United States,

most cases of anencephaly are detected during pregnancy, and the fetuses are usually aborted. Of those not aborted, half are stillborn. About 350 are born alive each year, and they usually die within days.

Baby Theresa's story is remarkable only because her parents made an unusual request. Knowing that their baby would die soon and could never be conscious, Theresa's parents volunteered her organs for immediate transplant. They thought her kidneys, liver, heart, lungs, and eyes should go to other children who could benefit from them. Her physicians agreed. Thousands of infants need transplants each year, and there are never enough organs available. But Theresa's organs were not taken, because Florida law forbids the removal of organs until the donor is dead. By the time Baby Theresa died, nine days later, it was too late—her organs had deteriorated too much to be harvested and transplanted.

Baby Theresa's case was widely debated. Should she have been killed so that her organs could have been used to save other children? A number of professional "ethicists"—people employed by universities, hospitals, and law schools, who get paid to think about such things—were asked by the press to comment. Most of them disagreed with the parents and physicians. Instead, they appealed to time-honored philosophical principles to oppose taking the organs. "It just seems too horrifying to use people as means to other people's ends," said one such expert. Another explained: "It's unethical to kill person A to save person B." And a third added: "What the parents are really asking for is, Kill this dying baby so that its organs may be used for someone else. Well, that's really a horrendous proposition."

Is it horrendous? Opinions were divided. These ethicists thought so, while the parents and doctors did not. But we are interested in more than what people happen to think. We want to know what's true. Were the parents right or wrong to volunteer their baby's organs for transplant? To answer this question, we have to ask what reasons, or arguments, can be given on each side. What can be said to justify the parents' request or to justify opposing their request?

The Benefits Argument. The parents believed that Theresa's organs were doing her no good, because she was not conscious

and would die soon anyway. The other children, however, could benefit from them. Thus, the parents seem to have reasoned: *If we can benefit someone without harming anyone else, we ought to do so. Transplanting the organs would benefit the other children without harming Baby Theresa. Therefore, we ought to transplant the organs.*

Is this correct? Not every argument is sound. In addition to knowing what arguments can be given for a view, we also want to know whether those arguments are any good. Generally speaking, an argument is sound if its assumptions are true and the conclusion follows logically from them. In this case, we might wonder about the assertion that Theresa wouldn't be harmed. After all, she would die, and isn't being alive better than being dead? But on reflection, it seems clear that, in these tragic circumstances, the parents were right. Being alive is a benefit only if it enables you to carry on activities and have thoughts, feelings, and relations with other people—in other words, if it enables you to *have a life*. Without such things, biological existence has no value. Therefore, even though Theresa might remain alive for a few more days, it would do her no good.

The Benefits Argument, therefore, provides a powerful reason for transplanting the organs. What arguments exist on the other side?

The Argument That We Should Not Use People as Means. The ethicists who opposed the transplants offered two arguments. The first was based on the idea that *it is wrong to use people as means to other people's ends*. Taking Theresa's organs would be using her to benefit the other children; therefore, it should not be done.

Is this argument sound? The idea that we should not "use" people is obviously appealing, but this is a vague notion that needs to be clarified. What exactly does it mean? "Using people" typically involves violating their *autonomy*—their ability to decide for themselves how to live their own lives, according to their own desires and values. A person's autonomy may be violated through manipulation, trickery, or deceit. For example, I may pretend to be your friend, when I am only interested in going out with your sister; or I may lie to you so you'll give me money; or I may try to convince you that you will enjoy going to the movies, when I only want you to give me a ride. In each case, I am manipulating you in order to get something for

myself. Autonomy is also violated when people are forced to do things against their will. This explains why “using people” is wrong; it is wrong because it thwarts people’s autonomy.

Taking Baby Theresa’s organs, however, could not thwart her autonomy, because she has no autonomy—she cannot make decisions, she has no desires, and she cannot value anything. Would taking her organs be “using her” in any other morally significant sense? We would, of course, be using her organs for someone else’s benefit. But we do that every time we perform a transplant. We would also be using her organs without her permission. Would that make it wrong? If we were using them *against* her wishes, then that would be a reason for objecting—it would violate her autonomy. But Baby Theresa has no wishes.

When people are unable to make decisions for themselves, and others must do it for them, there are two reasonable guidelines that might be adopted. First, we might ask, *What would be in their own best interests?* If we apply this standard to Baby Theresa, there would be no objection to taking her organs, for, as we have already noted, her interests will not be affected. She is not conscious, and she will die soon no matter what.

The second guideline appeals to the person’s own preferences: We might ask, *If she could tell us what she wants, what would she say?* This sort of thought is useful when we are dealing with people who have preferences (or once had them) but cannot express them—for example, a comatose patient who signed a living will before slipping into the coma. But, sadly, Baby Theresa has no preferences about anything, nor has she ever had any. So we can get no guidance from her, even in our imaginations. The upshot is that we are left to do what we think is best.

The Argument from the Wrongness of Killing. The ethicists also appealed to the principle that *it is wrong to kill one person to save another*. Taking Theresa’s organs would be killing her to save others, they said; so, taking the organs would be wrong.

Is this argument sound? The prohibition against killing is certainly among the most important moral rules. Nevertheless, few people believe it is *always* wrong to kill—most people think there are exceptions, such as killing in self-defense. The question, then, is whether taking Baby Theresa’s organs should be regarded as an exception to the rule. There are many reasons

to think so: Baby Theresa is not conscious; she will never have a life; she is going to die soon; and taking her organs would help the other babies. Anyone who accepts this will regard the argument as flawed. Usually, it is wrong to kill one person to save another, but not always.

There is another possibility. Perhaps we should regard Baby Theresa as already dead. If this sounds crazy, bear in mind that our conception of death has changed over the years. In 1967, the South African doctor Christiaan Barnard performed the first heart transplant in human beings. This was an exciting development; heart transplants could potentially save many lives. It was not clear, however, whether any lives could be saved in the United States. Back then, American law understood death as occurring when the heart stops beating. But once a heart stops beating, it quickly degrades and becomes unsuitable for transplant. Thus, under American law, it was not clear whether any hearts could be legally harvested for transplant. So, American law changed. We now understand death as occurring, not when the heart stops beating, but when the brain stops functioning: “brain death” is our new end-of-life standard. This solved the problem about transplants, because a brain-dead patient can still have a healthy heart, suitable for transplant.

Anencephalics do not meet the technical requirements for brain death as it is currently defined; but perhaps the definition should be revised to include them. After all, they lack any hope for conscious life, because they have no cerebrum or cerebellum. If the definition of brain death were reformulated to include anencephalics, we would become accustomed to the idea that these unfortunate infants are born dead, and so taking their organs would not involve killing them. The Argument from the Wrongness of Killing would then be moot.

On the whole, then, the arguments in favor of transplanting Baby Theresa’s organs seem stronger than the arguments against it.

1.3. Second Example: Jodie and Mary

In August 2000, a young woman from Gozo, an island south of Italy, discovered that she was carrying conjoined twins. Knowing that the health-care facilities on Gozo were inadequate to deal with such a birth, she and her husband went to St. Mary’s

Hospital in Manchester, England. The infants, known as Mary and Jodie, were joined at the lower abdomen. Their spines were fused, and they had one heart and one pair of lungs between them. Jodie, the stronger one, was providing blood for her sister.

No one knows how many sets of conjoined twins are born each year, but the number has been estimated at 200. Most die shortly after birth, but some do well. They grow to adulthood and marry and have children themselves. But the outlook for Mary and Jodie was grim. The doctors said that without intervention the girls would die within six months. The only hope was an operation to separate them. This would save Jodie, but Mary would die immediately.

The parents, who were devout Catholics, refused permission for the operation on the grounds that it would hasten Mary's death. "We believe that nature should take its course," they said. "If it's God's will that both our children should not survive, then so be it." The hospital, hoping to save Jodie, petitioned the courts for permission to perform the operation anyway. The courts agreed, and the operation was performed. As expected, Jodie lived and Mary died.

In thinking about this case, we should distinguish the question of *who should make the decision* from the question of *what the decision should be*. You might think, for example, that the decision should be left to the parents, and so the courts should not have intruded. But there remains the separate question of what would be the wisest choice for the parents (or anyone else) to make. We will focus on that question: Would it be right or wrong to separate the twins?

The Argument That We Should Save as Many as We Can. The rationale for separating the twins is that we have a choice between saving one infant or letting both die. Isn't it plainly better to save one? This argument is so appealing that many people will conclude, without further thought, that the twins should be separated. At the height of the controversy, the *Ladies' Home Journal* commissioned a poll to discover what Americans thought. The poll showed that 78% approved of the operation. People were obviously persuaded by the idea that we should save as many as we can. Jodie and Mary's parents, however, believed that there is an even stronger argument on the other side.

The Argument from the Sanctity of Human Life. The parents loved both of their children, and they thought it would be wrong to kill one of them even to save the other. Of course, they were not alone in thinking this. The idea that all human life is precious, regardless of age, race, social class, or handicap, is at the core of the Western moral tradition. It is especially emphasized in religious writings. In traditional ethics, the prohibition against killing innocent humans is absolute. It does not matter if the killing would serve a good purpose; it simply cannot be done. Mary is an innocent human being, and so she may not be killed.

Is this argument sound? The judges who heard the case did not think so, for a surprising reason. They denied that the operation would kill Mary. Lord Justice Robert Walker said that the operation would merely separate Mary from her sister and then “she would die, not because she was intentionally killed, but because her own body cannot sustain her life.” In other words, the operation wouldn’t kill her; her body’s weakness would. And so, the morality of killing is irrelevant.

The Lord Justice, however, has missed the point. It doesn’t matter whether we say that Mary’s death is caused by the operation or by her body’s own weakness. Either way, she will be dead, and we will knowingly have hastened her death. *That’s* the idea behind the traditional prohibition against killing the innocent.

There is, however, a more natural objection to the Argument from the Sanctity of Life. Perhaps it is *not* always wrong to kill innocent human beings. For example, such killings may be right when three conditions are met: (a) the innocent human has no future because she is going to die soon no matter what; (b) the innocent human has no wish to go on living, perhaps because she has no wishes at all; and (c) this killing will save others, who can go on to lead full lives. In these rare circumstances, the killing of the innocent might be justified.

1.4. Third Example: Tracy Latimer

Tracy Latimer, a 12-year-old victim of cerebral palsy, was killed by her father in 1993. Tracy lived with her family on a prairie farm in Saskatchewan, Canada. One Sunday morning while his wife and other children were at church, Robert Latimer put Tracy in the cab of his pickup truck and piped in exhaust

fumes until she died. At the time of her death, Tracy weighed less than 40 pounds, and she was described as “functioning at the mental level of a three-month-old baby.” Mrs. Latimer said that she was relieved to find Tracy dead when she arrived home and added that she “didn’t have the courage” to do it herself.

Robert Latimer was tried for murder, but the judge and jury did not want to treat him harshly. The jury found him guilty of only second-degree murder and recommended that the judge ignore the mandatory 10-year sentence. The judge agreed and sentenced him to one year in prison, followed by a year of confinement to his farm. But the Supreme Court of Canada stepped in and ruled that the mandatory sentence must be imposed. Robert Latimer entered prison in 2001 and was paroled in 2008.

Legal questions aside, did Mr. Latimer do anything wrong? This case involves many of the issues that we saw in the other cases. One argument against Mr. Latimer is that Tracy’s life was morally precious, and so he had no right to kill her. In his defense, it may be said that Tracy’s condition was so catastrophic that she had no prospects of a “life” in any but a biological sense. Her existence had been reduced to pointless suffering, and so killing her was an act of mercy. Considering those arguments, it appears that Robert Latimer acted defensively. There were, however, other points made by his critics.

The Argument from the Wrongness of Discriminating against the Handicapped. When Robert Latimer was given a lenient sentence by the trial court, many handicapped people felt insulted. The president of the Saskatoon Voice of People with Disabilities, who has multiple sclerosis, said: “Nobody has the right to decide my life is worth less than yours. That’s the bottom line.” Tracy was killed because she was handicapped, he said, and that is unconscionable. Handicapped people should be given the same respect and the same rights as everyone else.

What are we to make of this? Discrimination is always a serious matter, because it involves treating some people worse than others, for no good reason. Suppose, for example, that a blind person is refused a job simply because the employer doesn’t like the idea of hiring someone who can’t see. This is no better than refusing to hire someone because she is Hispanic or Jewish or female. Why is this person being treated

differently? Is she less able to do the job? Is she less intelligent or less industrious? Does she deserve the job less? Is she less able to benefit from employment? If there is no good reason to exclude her, then it is arbitrary to do so.

Should we think of the death of Tracy Latimer as a case of discrimination against the handicapped? Robert Latimer argued that Tracy's cerebral palsy was not the issue: "People are saying this is a handicap issue, but they're wrong. This is a torture issue. It was about mutilation and torture for Tracy." Just before her death, Tracy had undergone major surgery on her back, hips, and legs, and more surgery was planned. "With the combination of a feeding tube, rods in her back, the leg cut and flopping around and bedsores," said her father, "how can people say she was a happy little girl?" At the trial, three of Tracy's physicians testified about the difficulty of controlling her pain. Thus, Mr. Latimer denied that Tracy was killed because of her disability; she was killed because she was suffering, and because there was no hope for her.

The Slippery Slope Argument. When the Canadian Supreme Court upheld Robert Latimer's sentence, the director of the Canadian Association of Independent Living Centres said that she was "pleasantly surprised." "It would have really been the slippery slope, and opening the doors to other people to decide who should live and who should die," she said.

Other disability advocates echoed this idea. We may feel sympathy for Robert Latimer, it was said; we may even think that Tracy Latimer is better off dead. However, it is dangerous to think like this. If we accept any sort of mercy killing, we will slide down a "slippery slope," and at the bottom of the slope, all life will be held cheap. Where will we draw the line? If Tracy's life is not worth protecting, what about the lives of other disabled people? What about the elderly, the infirm, and other "useless" members of society? In this context, Hitler's program of "racial purification" is often mentioned, implying that we will end up like the Nazis if we take the first step.

Similar "slippery slope arguments" have been used on other issues. Abortion, in vitro fertilization (IVF), and human cloning have all been opposed because of what they might lead to. Sometimes, in hindsight, it is evident that the worries were unfounded. This has happened with IVF, a technique for

creating embryos in the lab. When Louise Brown, the first “test tube baby,” was born in 1978, there were dire predictions about what might be in store for her and for society as a whole. But none of those predictions came true, and IVF has become routine. Since Louise Brown’s birth, over 100,000 American couples have used IVF to have children.

Without the benefit of hindsight, however, slippery slope arguments are hard to assess. As the old saying has it, “It’s tough to make predictions, especially about the future.” Reasonable people may disagree about what would happen if mercy killing were allowed in cases like Tracy Latimer’s. Those inclined to defend Mr. Latimer may find the dire predictions unrealistic, while those who want to condemn him may insist that the predictions are sensible. This kind of disagreement can be hard to resolve.

It is worth noting, however, that slippery slope arguments are easy to abuse. If you are opposed to something but have no good arguments against it, you can always make up a prediction about what it might lead to; and no matter how implausible your prediction is, no one can prove you wrong. That is why such arguments should be approached with caution.

1.5. Reason and Impartiality

What can we learn from all this about the nature of morality? As a start, we may note two main points: first, moral judgments must be backed by good reasons; and second, morality requires the impartial consideration of each individual’s interests.

Moral Reasoning. The cases of Baby Theresa, Jodie and Mary, and Tracy Latimer are liable to arouse strong feelings. Such feelings are often a sign of moral seriousness and may be admired. But they can also get in the way of discovering the truth: When we feel strongly about an issue, it is tempting to assume that we just *know* what the truth is, without even having to consider arguments on the other side. Unfortunately, however, we cannot rely on our feelings, no matter how powerful they may be. Our feelings may be irrational; they may be nothing but the products of prejudice, selfishness, or cultural conditioning. At one time, for example, people’s feelings told them that members of other races were inferior and that slavery was God’s plan.

Moreover, people's feelings can be very different. In the case of Tracy Latimer, some people feel strongly that her father deserved a long prison term, while others feel equally strongly that he should never have been prosecuted. But both of these feelings cannot be correct.

Thus, if we want to discover the truth, we must let our feelings be guided as much as possible by reason. This is the essence of morality. The morally right thing to do is always the thing best supported by the arguments.

This is not a narrow point about a small range of moral views; it is a general requirement of logic that must be accepted by everyone, regardless of their position on any particular issue. The fundamental point may be stated simply. Suppose someone says that you ought to do such-and-such. You may legitimately ask why you should do it, and if no good reason can be given, you may reject the advice as arbitrary or unfounded.

In this way, moral judgments are different from expressions of personal taste. If someone says, "I like coffee," she does not need to have a reason—she is merely stating a fact about her preferences, and nothing more. There is no such thing as "rationally defending" one's like or dislike of coffee. So long as she is accurately reporting her taste, what she says must be true. On the other hand, if someone says that something is morally wrong, he does need reasons, and if his reasons are legitimate, then other people must acknowledge their force. By the same logic, if he has no good reason for what he says, then he is simply making noise, and we may ignore him.

Of course, not every reason that may be advanced is a good reason. There are bad arguments as well as good ones, and much of the skill of moral thinking consists in discerning the difference. But how do we tell the difference? How do we go about assessing arguments? The examples we have considered point to some answers.

The first thing is to get one's facts straight. Often this is not as easy as it sounds. Sometimes key facts are unknown. Other times, matters are so complex that even the experts disagree. Yet another problem is human prejudice. Often we *want* to believe something because it supports our preconceptions. Those who disapprove of Robert Latimer's action, for example, will want to believe the dire predictions of the Slippery Slope Argument; those who approve of his actions will want to reject

them. It is easy to think of other examples: People who do not want to give to charity often say that charities are inefficient and corrupt, even when they have no good evidence for this; and people who dislike homosexuals may say that gay men are all pedophiles, even though very few are. But the facts exist independently of our wishes, and responsible moral thinking begins when we try to see things as they are.

Next, we can bring moral principles into play. In our three examples, a number of principles were involved: that we should not “use” people; that we should not kill one person to save another; that we should do what will benefit the people affected by our actions; that every life is sacred; and that it is wrong to discriminate against the handicapped. Most moral arguments consist of principles being applied to particular cases, and so we must ask whether the principles are justified and whether they are being applied correctly.

It would be nice if there were a simple recipe for constructing good arguments and avoiding bad ones. Unfortunately, there is not. Arguments can go wrong in many ways, and we must always be alert to the possibility of new complications and new kinds of error. But that is not surprising. The rote application of routine methods is never a satisfactory substitute for critical thinking, in any area. Morality is no exception.

The Requirement of Impartiality. Almost every important moral theory includes the idea of impartiality. This is the idea that each individual’s interests are equally important; no one should get special treatment. At the same time, impartiality requires that we not treat the members of particular *groups* as inferior, and thus it condemns forms of discrimination like sexism and racism.

Impartiality is closely connected with the idea that moral judgments must be backed by good reasons. Consider the racist who thinks that white people deserve all the good jobs. He would like all the doctors, lawyers, business executives, and so on, to be white. Now we can ask for reasons; we can ask why this is thought to be right. Is there something about white people that makes them better fitted for the highest-paying and most prestigious positions? Are they inherently brighter or more industrious? Do they care more about themselves and their families? Would they benefit more from such employment? In

each case, the answer is no; and if there is no good reason for treating people differently, then discrimination is unacceptably arbitrary.

The requirement of impartiality, then, is at bottom nothing more than a rule against treating people arbitrarily. It forbids treating one person worse than another when there is no good reason to do so. But if this explains what is wrong with racism, it also explains why, in some cases, it is *not* racist to treat people differently. Suppose a movie director were making a film about Fred Shuttlesworth (1922–2011), the heroic African-American civil rights leader. This director would have a good reason not to cast Christian Bale in the starring role. Such “discrimination” would not be arbitrary or objectionable.

1.6. The Minimum Conception of Morality

We may now state the minimum conception: Morality is, at the very least, the effort to guide one’s conduct by reason—that is, to do what there are the best reasons for doing—while giving equal weight to the interests of each individual affected by one’s decision.

This gives us a picture of what it means to be a conscientious moral agent. The conscientious moral agent is someone who is concerned impartially with the interests of everyone affected by what he or she does; who carefully sifts facts and examines their implications; who accepts principles of conduct only after scrutinizing them to make sure they are justified; who is willing to “listen to reason” even when it means revising prior convictions; and who, finally, is willing to act on the results of this deliberation.

As one might expect, not every ethical theory accepts this “minimum.” This picture of the moral agent has been disputed in various ways. However, theories that reject the minimum conception encounter serious difficulties. Most philosophers realize this, and so most theories of morality incorporate the minimum conception, in one form or another.