

**An argument for the use of Aristotelian method in  
bioethics**

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## **An argument for the use of Aristotelian method in bioethics**

### **Abstract**

The main claim of this paper is that the method outlined and used in Aristotle's *Ethics* is an appropriate and credible one to use in bioethics. Here "appropriate" means that the method is capable of establishing claims and developing concepts in bioethics and "credible" that the method has some plausibility, it is not open to obvious and immediate objection. It begins by suggesting why this claim matters and then gives a brief outline of Aristotle's method.

The main argument is made in three stages. First, it is argued that Aristotelian method is credible because it compares favourably with alternatives. In this section it is shown that Aristotelian method is not vulnerable to criticisms that are made both of methods that give a primary place to moral theory (such as utilitarianism) and those that eschew moral theory (such as casuistry and social science approaches). As such, it compares favourably with these other approaches that are vulnerable to at least some of these criticisms. Second, the appropriateness of Aristotelian method is indicated through outlining how it would deal with a particular case. Finally, it is argued that the success of Aristotle's philosophy is suggestive of both the credibility and appropriateness of his method.

## **I Introduction – Why does method matter?**

The main claim of this paper is that the method outlined and used in Aristotle's *Ethics* is an appropriate and credible one to use in bioethics. Here, "appropriate" means that the method is capable of establishing claims and developing concepts in bioethics and "credible" that the method has some plausibility, it is not open to obvious and immediate objection.

The claim is of importance for at least two reasons. First, it is incumbent on bioethicists to use an appropriate and credible method; the paper will argue that ethicists have erred where they have not done so. Second, virtue ethics has re-emerged into the ethical mainstream, including applied ethics. This process began with Anscombe's (1958) well-known article. Many writers then pursued the theme that Aristotelian concepts, such as character and virtue, had been wrongly neglected since the enlightenment (most famously, MacIntyre, 1985; but there are many others, represented, for example, in the collection edited by Crisp, 1996). Virtue ethics has also made an appearance in bioethics. Thus we see it applied to abortion (Hursthouse, 1987), mental illness (Megone, 2000) and a variety of other topics (for example, Shelp, 1985). The primary source of the concepts used by virtue ethicists is Aristotle. If these concepts were not derived from a credible and appropriate method then virtue ethics would be seriously undermined. Thus, successfully showing Aristotle's ethical method to be appropriate and credible is

important for the defence of the more general use of virtue ethics in applied ethics.

Before turning to the main argument the paper briefly outlines Aristotelian method. The main argument is made in three stages. First, it is argued that Aristotelian method is credible because it compares favourably with alternatives. In this section it is shown that Aristotelian method is not vulnerable to criticisms that are made both of methods that give a primary place to moral theory (such as utilitarianism) and those that eschew moral theory (such as casuistry and social science approaches). As such, it compares favourably with these other approaches that are vulnerable to at least some of these criticisms. Second, it is argued that Aristotelian method is appropriate through discussion of how it would deal with a particular case. Finally, it is argued that the success of Aristotle's philosophy is suggestive of both the credibility and appropriateness of his method.

## **II Aristotle's method**

The first step, then, is to set out Aristotle's method. In doing this, the paper will by-pass many points of controversy and exegesis. For these, the reader should look to other texts that describe and discuss the method in more detail (e.g. Megone, 1997; Irwin, 1988; Reeve, 1992; Nussbaum, 1986; Lear, 1988; Hardie 1980).

The word “method” derives ultimately from two Greek words. These are *meta* (μετα), which, in this context, means “in pursuit” and *hodos* (οδος), which means “road” or “journey”. Hence we may think of a method of inquiry as being a journey in pursuit of knowledge. In bioethics that knowledge is ultimately practical, that is, knowledge of what we should do in certain situations. Aristotle's ethical method can be thought of as consisting of three main stages. These are, first, setting out the relevant phenomena, second, setting out the puzzles and third, developing an account to explain the phenomena and resolve the puzzles. Taken together the method can be called dialectic, although the sense often given to that term, of the use of questions to draw out premises and conclusions in debate, is clearest in the third stage. It is worth emphasising that the three stages are not chronological. Usually it is the awareness of puzzles that stimulates inquiry; furthermore, new phenomena and puzzles may emerge when inquiry is well under way. With that in mind, we may now consider the stages in a little more detail.

*Stage one: setting out the phenomena/endoxa.*

For Aristotle, inquiry begins by attending to the phenomena, the world as it appears to us (Reeve, 1992, p. 35). However, one should “filter” the phenomena, discarding the truly wayward (such as the ethical views of psychopaths). In this context, Aristotle uses the term *endoxa* (singular, *endoxon*).

“*Endoxa* are those opinions accepted by everyone or by the majority or by the wise - either by all of them or by most or by the most notable and reputable.... For not every phenomenon is an *endoxon*.” (*Top.* 100b21-6 – cited and translated by Reeve, 1992, p. 35).

In other words, *endoxa* are the phenomena that it is worthwhile bothering with; they are phenomena with “additional epistemic weight” (Reeve, 1992, p.37). This weight will derive from different sources. If a phenomenon is an opinion shared by everyone, or if an expert in the field possesses it, then it is an *endoxon*. Thus the source of the *endoxa* that are the starting point for ethical inquiry are all relevant opinions held either by the wise or by many people (provided they are sufficiently mature, *NE* 1095a5).

It is important to note that the *endoxa* will usually consist of more than people’s ethical opinions. Phenomena are the world as it appears and is experienced by us very broadly (Nussbaum, 1986, p. 245). Thus ethical inquiry into, say, the ethics of abortion will include social scientific research showing women’s experiences of, and beliefs about, the subject; it will include biological information about the development of the embryo; and it will, of course, include the writings of ethicists on the topic. Presently, it will be argued that this is an important strength of the Aristotelian approach (in section III.3).

Stage two: setting out the puzzles.

The second stage of the method involves setting out the puzzles. (The Greek term for “puzzles” is *ἀπορίαι*; hence Aristotle's method is sometimes termed “aporetic”. Literally, the term means “difficulties of passage”; this relates nicely to the idea that method is a road or journey in pursuit of knowledge.) These puzzles will be such things as clashes of opinion and incomplete knowledge. Puzzles to do with incomplete knowledge show us that we do not have the explanation, we cannot deductively explain the beliefs that we have. As such it means that we do not know that the belief is true. Puzzles to do with conflicting beliefs show that we do not have true beliefs, or more precisely, that not all of the beliefs, or *endoxa*, are true.

As well as showing us that the *endoxa* need attention, the puzzles enable us to see more clearly where attention should be focused. Aristotle warns that those who inquire without attending to the puzzles are likely to offer poor accounts and solutions (see *Met* 955a27-b4). To ignore a puzzle is to risk establishing a false account that does not resolve it. As already stated, it is usually puzzles that stimulate inquiry. However, Smith (1997, p. xviii) refers to the application of Aristotelian method as a “first mover” in philosophical inquiry. He suggests that investigation of (apparently puzzle-free) phenomena may reveal puzzles and shake us from our complacency.

*Stage three: explaining the phenomena and resolving the puzzles.*

The third stage of Aristotle's method is the most controversial. I shall begin with points that are generally agreed. The first is that the goal of the third stage is resolution of the puzzles. However, it would be feasible to offer an account of something that resolves the puzzles by throwing out all, or most, of the *endoxa*. Aristotle's method does not permit this. One must resolve the puzzles but also explain the phenomena. The Greek verb translated by “explain” is δεικνύναι, which is also translated as “to establish” and “to prove”. Aristotle believes most phenomena, certainly those which qualify as *endoxa*, to be “not entirely in error but correct on one point at least, or even most points” (*NE* 1098b29). It follows that the best account will explain the true elements contained in the false viewpoints and the source of error as well as explaining the truth of the true viewpoint. This means that the final account must refer back to the *endoxa*. It must show why many, probably most, of the *endoxa* are true as well as explaining the false ones.

A second point that is generally agreed about stage three is that it is here that the dialectical nature of Aristotle's method is seen most clearly. Dialectic can be seen approximately as the use of question and answer to establish premises that are used to reach conclusions. These conclusions might be unacceptable to the answerer, thus forcing him to re-think his answers, or they might be acceptable, thus enabling him to see implications of his position. Earlier philosophers, such as Plato, Zeno and Socrates had used dialectic, but Aristotle developed it into its

most systematic form (particularly in *Topics*, although it is also seen clearly in the *Nicomachean Ethics*).

The puzzles thrown up in stage two of ethical inquiry are likely to be those of conflicting belief. In such cases, dialectic involves “making a new start” (*NE* 1174a13-14, 1145a15). Faced with conflicting beliefs one should go back a step onto more certain ground. Thus, if two people disagree over something then one seeks more fundamental ground on which they agree. More precisely, one should move from the conflicting viewpoints onto ground that is unchallenged by the puzzles. From this point one argues deductively forward to the area of disagreement and, hopefully, is able to show what is right and wrong, and how the error came to be made.

This takes us into a more controversial area: the role of first principles. Aristotle contrasts dialectic with demonstration. In demonstration one shows the truth of a conclusion by proceeding deductively from true premises. The ultimate demonstration is one that proceeds from first principles. These are primary features of the world that explain the phenomena/*endoxa* but which cannot themselves be explained. Aristotle's vision of a “complete science” is one that has a set of first principles which explain all the phenomena under its purview (Irwin, 1988). In dialectic one proceeds inductively from phenomena/*endoxa*. Where one proceeds to is a matter of controversy (Sim, 1999). For some commentators, dialectic is the method by which one achieves first

principles that are then used in demonstration. Others believe it is a method used for persuasion, the testing of claims, the development of questions or, finally, the development of knowledge short of first principles. For all these commentators, first principles are generated, if at all, by methods other than dialectic. The key problem with dialectic, from their point of view, is that it seems hard to understand how one can move from the matters of belief that constitute *endoxa* towards the indubitable matters of fact that constitute first principles. I shall return to this problem presently.

This, then, is an outline of Aristotle's method. It starts with *endoxa* and ends with points of agreement from which a deductive demonstration can proceed. The precise nature of those points of agreement, whether they constitute first principles, matter of truth that are less than first principles, or simply rhetorically achieved points, is disputed. We turn next to the main claim of the paper, that Aristotle's method is appropriate and credible for use in bioethics. The first step here is to show how the method compares favourably with others.

### **III Aristotle's method compares favourably with alternatives**

That *endoxa* should be a starting point in bioethical discussion is perhaps beyond dispute. It is hard to imagine writing about such topics as euthanasia or abortion without reference to views held. This is particularly so given that the stimulus for discussion is likely to be conflicts between those views. Thus the second stage of Aristotle's

method, setting out the puzzles, is also fairly uncontroversial. The third stage is more problematic: resolving the puzzles, explaining the *endoxa* and, arguably, moving towards first principles. All writers will, presumably, seek a resolution of puzzles. However, they may disagree with the two other elements.

Critics may espouse one of at least two alternative methods. The first is a theory-led method, such as utilitarianism or Kantianism. Such approaches are willing to “leave behind” *endoxa* and to espouse counter-intuitive results if that is what the theory implies. The second is a practice-led method, such as casuistry or (particularist) care ethics. Some such approaches will see no role for theories and first principles being led instead by, for example, intuitions in the particular situation. Here I shall defend Aristotle's method of explaining *endoxa* and moving towards first principles. Indeed, I shall argue that explaining *endoxa* requires something like a move towards first principles. In doing this I shall engage with theory-led and practice-led approaches, attempting to show the superiority of the Aristotelian approach.

### III.1 Explaining the *endoxa*

As we've seen, Aristotle requires a solution of puzzles to establish, prove or explain ( $\delta\epsilonικνυν\alpha\iota$ ) the *endoxa*. This will involve paying close attention to the *endoxa*; we should assume that they are either true or true in part. If the latter, we should look for the site of error. The *endoxa* should be used to check our conclusions; we should be reluctant to

accept a solution with absurd or abhorrent conclusions. As Aristotle states,

“Care must be taken not to uphold a hypothesis which is generally unacceptable. There are two ways in which it may be unacceptable. It may be one that leads to the making of absurd statements ... or it may be one which a bad character would choose.” (*Topics* 160b17-22).

The main source of criticism of this approach will arise from those who believe bioethics should be theory-led. An important example of this approach is that of Hare (1975, p. 201) who states,

“If philosophers are going to apply ethical theory successfully to practical issues, they must first have a theory.”

In Hare’s case this theory is to be developed through attention to an analysis of language. He argues that we have intuitions that serve us much of the time (what he calls, “level one thinking”). Where these break down we need to adopt level two thinking, drawing on ethical theory. Such thinking is above our intuitions and hence has no need to “explain” them. Furthermore, should the conclusions prove counterintuitive or repugnant then, provided we have our theory right, we should not be concerned. Peter Singer adopts this position enthusiastically. Led by his own theory (shared with Hare) of preference

utilitarianism, Singer often draws conclusions that shock. Here are two examples (from Singer, 1993, p. 169 and 191, respectively).

“...no fetus has the same claim to life as a person ... these arguments apply to the newborn baby as much as to the fetus.”

“...killing a disabled infant is not morally equivalent to killing a person. Very often it is not wrong at all.”

Singer goes on to argue that it is permissible to kill brain damaged, but conscious (although not “self-conscious”) humans if their lives are, on the whole, miserable (Singer, 1993, p. 192). Singer is not the only writer who is willing to settle issues in ways that contravene strongly held tenets of ethical belief. Harris’s (1975) article, “The survival lottery”, in which he seems to advocate killing people in order to save the lives of others through organ donation, is a famous example.

Kantians also share this theory-led approach; an example is O’Neill (2001). She has applied a Kantian conception of autonomy to issues in bioethics. She objects, in particular, to the “individual view” of autonomy, the view that autonomy is an attribute of most adults and most of their actions. She develops instead her own Kantian view of “principled autonomy” (which differs markedly from that developed by other Kantians such as Hill [1995] and Korsgaard [1996]). On this account autonomy is a characteristic of the principle behind action rather than of

the action *per se* and is not a characteristic of agents at all. The problem here is that O'Neill is willing to discard very strongly held *endoxa* without a “by your leave”. An Aristotelian would be reluctant to give up the “individual view” of autonomy and would certainly want a good explanation of why this “false” view had come to be so strongly held. It should also be recalled that whilst O'Neill avoids abhorrent conclusions, Kant himself does not, as, for example, where his absolute injunction against lying would lead to great harm (Kant AK 8:427, 1997).

In response, both Kantians and Utilitarians will share Hare's concern about the attention Aristotelian method pays to *endoxa*. This is that it leaves one locked in “level one” thinking whenever our intuitions break down. Theory of some kind is required to move beyond this.

“How should we choose between … conflicting intuitions? Is it simply a contest in rhetoric?” (Hare, 1975, p. 203).

The first point to be made in response here is that the theory-led method of dealing with conflicting intuitions is unsatisfactory (Norman, 2000). The application of dialectic does not leave one locked at “level one”. One starts with *endoxa* but is able to resolve disputes by moving to more basic shared beliefs. To take a common enough example, disputes about abortion are often taken forward through examination of what our fundamental beliefs are concerning what is a human being and why it is generally wrong to kill them. Whilst the abortion debate is far from

settled, it seems wrong to say that there has been no progress, no movement from “level one”. By contrast, the imposition of ethical theory is unpromising. Faced with an apparently absurd or abhorrent conclusion, very few will be persuaded simply because that conclusion was reached from a plausible moral theory (such as, say, preference utilitarianism). In this context it is noteworthy that Thomson’s (1971) contribution to the abortion debate, which Hare criticises for its reliance on “intuition”, has been far more influential than Hare’s own rather bizarre contribution (Hare, 1975).

This leads to a second point in defence of Aristotelian method. Bioethics is applied ethics. As such, its main purpose is to reach agreement on action. Approaches that fail to pay due regard to *endoxa*, particularly where they reach jarring or abhorrent conclusions, will neither achieve success rhetorically nor, therefore, practically. An Aristotelian can eventually come to a conclusion that is out of line with the majority view, Aristotle himself does, but he should do so in a way that does not leave the majority behind. His conclusion must be reached in ways that draw upon other, more fundamental, *endoxa*. He should also be able to explain why the false view held by the majority (or by the wise) seemed plausible. Above all, one’s first instinct when faced with a repugnant or counterintuitive thesis should be that one is likely to have erred; one should be reluctant to embrace it.

Nonetheless, a critic may say that all one might achieve through dialectic is rhetorical success (Smith, 1999). Agreement between disputants is no sign that they have reached the correct result; they might both be wrong. More charitably, the critic might say that dialectic does have a role, but only a persuasive one once one has reached the correct result through other means. If dialectic is to reach true results and (*a fortiori*) first principles then it must be because of the basic reliability of the *endoxa*: they must be true for the most part, as Aristotle claims. But why should one accept this? It seems, then, that a defence of Aristotle's requirement to explain the *endoxa* needs, in turn, a defence of the belief that Aristotelian method moves towards truth and, perhaps, first principles. If dialectic does not move towards truth then there is no need to explain the *endoxa* as they may all be wrong. Let us then turn to this task.

### III.2 Moving to first principles

Both theory-led and practice-led critics may argue that dialectic cannot deliver first principles. It seems to require that people reach agreement through finding common ground. At best, this will achieve a consistent, puzzle-free set of beliefs; but there seems no reason to believe a consistent set to be true. It might be possible for there to co-exist sets of beliefs that are internally consistent but incompatible. At that point, the Aristotelian method would have no way of deciding which set to prefer.

From a practice-led perspective there are at least two further criticisms. In the first place, some particularists may doubt the existence of first principles at all. Dancy (1992) considers the utilitarian principle of maximising happiness or preference satisfaction. It is well known that such a principle can lead to absurd results. However, in the case of public executions it is the application of the principle itself that contributes to the wrong; part of what is wrong with public executions is precisely that it increases happiness and satisfies preferences; Dancy doubts that there are principles of any kind that can be drawn from ethical theory and applied to practical cases (Dancy, 1996).

Others in the practice-led camp might concede the existence of first principles but doubt their utility in applied ethics. Those making this criticism might include Aristotelians influenced by casuistry, such as McDowell (1979) and casuists influence by Aristotelianism, such as Jonsen (1991). Both emphasise the role of practical wisdom in ethical decision-making. For McDowell, the virtuous agent, who possesses practical wisdom, will know the right reasons for action and will behave accordingly. However, the reasons he gives for his behaviour will be unconvincing to a non-virtuous agent. Thus, first principles are known by virtuous agents but are not persuasive to others; the non-virtuous cannot know them. In terms of applied ethics, presuming there are many non-virtuous agents (as Aristotle believes, *NE* 1150a12) this looks like a dead end.

That dialectic cannot deliver first principles (or approach them) is the key criticism. There have been many attempts to tackle it; I shall focus on those made by Irwin (1988) and Bäck (1999). Irwin posits two types of dialectic. The first is pure dialectic. This seeks to resolve puzzles by making a new start from premises that are not challenged by those puzzles. Irwin accepts that pure dialectic can only deliver sets of beliefs that are consistent but not necessarily true. The second is strong dialectic. This also makes a new start from premises not challenged by puzzles. However, it draws upon a particular subset of premises. Not only are these premises unchallenged by the puzzles, they are also such as to be almost impossible to deny. By the use of this subset of premises, strong dialectic is able to deliver sets of beliefs that are true.

Irwin claims that Aristotle makes extensive use of strong dialectic. He begins his case for this argument with Aristotle's *Metaphysics*. In the *Metaphysics* Aristotle considers the case of someone who denies certain bedrock beliefs. One such is the principle of non-contradiction. This holds that it is not possible for contradictory statements to be true (Irwin, 1988, p. 547). Aristotle suggests that a denial of this principle is impossible to state coherently. The details of the argument are not required here. The point is that the principle of non-contradiction is not just generally agreed but that it cannot be coherently rebutted. According to Irwin, Aristotle develops the method of strong dialectic in the *Metaphysics*. He creates and uses premises that are not just

matters of general agreement but which are the presuppositions to any inquiry.

Even were one to accept Irwin's account, however, one may doubt whether it helps to overcome the problem in relation to ethical concepts.

Aristotle does not appear to use strong dialectic in the *Nicomachean Ethics*. The *endoxa* that are the starting points in ethics are such things as widely held beliefs to do with happiness and virtue; and the explanations to which these lead seem far weaker than those first principles to which strong dialectic is supposed to appeal, such as the principle of non-contradiction. It follows that Aristotle's conclusions in the *Nicomachean Ethics* are open to sceptical doubt even if those in the *Metaphysics* are not. Irwin's response is to say that Aristotle does, in fact, use strong dialectic in the *Nicomachean Ethics* (Irwin, 1988, esp. chapters 15-18). In particular, he appeals to basic principles that are not open to reasonable dispute and which are often derived from other areas of the Aristotelian *corpus*, themselves based on strong dialectic.

The function argument illustrates this point (*NE* 1097b24ff – see also, the discussion by Whiting, 1988). This is the argument that derives a definition of happiness from the premise that man has a function ( $\varepsilon\psi\sigma\nu$ ): to reason well. One thing that is striking about the function argument is the way Aristotle imports a number of ideas from other areas of his thought. For example, he imports the idea that there are things that are natural kinds (i.e. living things) which have teleological, goal-directed natures; that the form, or soul, of these natural kinds lies in their goal or

*telos*; that there are three main types of soul (nutritive, perceptive, rational); and that natural kinds possess an intrinsic good in performing their function (unlike artefacts). Irwin argues that these premises are ultimately derived from strong dialectic used by Aristotle in other works. As such, someone who challenges his conclusion will be subject to serious problems in his reasoning and in living of his life.

However, Nussbaum (1986, pp. 257-8) makes the point that it seems one can opt out of the first principles of ethics (such as temperance) rather easier than one can from the first principles of metaphysics (such as the principle of non-contradiction). In the latter case one seems to be required to opt out of human life altogether; in the former case one can live in society, although perhaps not well, or fully part of it. Therefore, Irwin overstates his case.

Bäck (1999) takes a different tack. He draws a parallel between Aristotle's approach and Popper's fallibilism in the philosophy of science (Popper, 1989). The key point here is that science proceeds by making fallible conjectures that it then subjects to rigorous testing. In the same way, Bäck suggests that dialectical reasoning should be seen not as a sure-fire mechanism for achieving first principles but rather as a fallible means of moving towards them and of subjecting them to rigorous scrutiny.

Bäck and Irwin show that there are resources to rebut the criticism that dialectic cannot deliver. To this one may add that, as shown earlier, theory-led approaches seem unable to offer a better way of moving towards first principles. However, this leaves in place the two criticisms from the practice-led position. The first of these is based on the view that there are no first principles. From such a perspective, one would not move towards first principles through the use of dialectic. Rather, one would generate principles that differed on a case-by-case basis because, in reality, it is the cases rather than the principles that lead us to a solution. The second criticism is based on the view that there are first principles but that they do not help in practical situations; what is required there is practical wisdom.

In response it is worth stating first that Aristotelian method is not particularly hostile to casuistry and particularism. Indeed there are many proponents of combinations of these views. Furthermore, Bäck's fallibilist position looks highly compatible with casuist methods that derive tentative principles from paradigm cases with a view to applying (and thereby testing) them on other cases (Kuczewski, 1998). The key area of disagreement will be between Aristotelians who apply great philosophical import to dialectic as a method of achieving or approaching first principles and those, Aristotelian and others, who do not.

There are at least two reasons one might favour the “first principle” camp. The first is that achieving first principles through dialectic is what

Aristotle appears to attempt in, for example, the *Nicomachean Ethics*. Other writers have attempted to show how proposed first principles derived through Aristotelian method, such as virtue and happiness, can be used in applied ethics (Crisp, 1996; Hursthouse, 1987). The second reason is that those who deny the role of first principles in applied ethics seem to describe wrongly the role of practical wisdom. Their approach looks like naïve intuitionism, in which people, or certain people, intuitively grasp what is right without recourse to reasoning or principles. However, neither intuitionism nor practical wisdom based theories require this (Nelson, 1999). Practical wisdom is best viewed as educated intuition. The practically wise agent grasps the right course of action in the same way that an art expert grasps that a certain painting is a fake: it is intuition, but it is best on experience, principles and reflection. And in ethics, dialectic is key to that education.

To summarise: Aristotelian method has been subject to criticism from both theory-led and practice-led commentators. These criticisms have included the denial of the importance of explaining the *endoxa* and a denial of the role of first principles (or the ability of dialectic to reach them). I argued that explaining the *endoxa* is important at least for rhetorical reasons; without it, the theory-led approaches are unpersuasive when they reach counter-intuitive results. However, arguing that explaining the *endoxa* is more important than this requires that one show that dialectic can approach first principles. I described Irwin's and Bäck's attempts to do this: the latter seems particularly

promising as it is compatible with both Popperian critical realism and with some elements of casuistry. There is at least one further argument in favour of Aristotelian method.

### III.3 The social science critique of applied ethics

Hedgecoe (2004) describes what he terms “the social science critique of applied ethics”. This critique focuses particularly on what has been termed here the “theory-led approach” represented by utilitarianism, Kantianism and the principles approach. Put simply, the criticism is that such approaches give a dominant role to the idealised, rational thought represented by their theories and ignore important evidence from the social sciences. This matters because what is “applied” in moral decision-making is a great deal more than moral theory. For example, identifying and describing a situation as one that requires a moral decision always draws upon resources outside moral theory. Furthermore, these descriptions rarely contain components that sit neatly within moral theory, such as “autonomous agent”, “disease”, “person”, “preferences”, “universalizability” and so forth. By imposing such categories on discussion, bioethics renders itself worthless to genuine decision-making.

In some senses this criticism echoes that made from the standpoint of casuists and related schools (such as “caring ethics”). The net result is that ethicists are enjoined to adopt a “bottom-up” approach. However, the social science critique may take this further, suggesting that our main

attention be focused on empirical research showing us how people construct moral problems and deal with them. Hedgecoe points out that bioethics performed in this way would lose its critical, normative edge. He advocates, instead, what he terms “critical bioethics”. He describes a number of characteristics of this approach: these include that it is empirically rooted and theory challenging. Let us examine these two characteristics.

Hedgecoe describes critical bioethics as “resolutely bottom up”. It begins from the problems that arise and how those appear to participants. He goes on to say that for bioethicists, the “first port of call should be the social science literature about that technology, rather than the standard bioethics debates.” This is what it means to be empirically rooted.

Critical ethics is also theory challenging. Here it is best to quote Hedgecoe (2004, p. 137) at greater length.

“This does not mean that philosophical ethical theories (covering all levels of aempirical speculation, not just traditional meta-theoretical issues) are worthless, simply that critical bioethics tests its theories in the light of empirical experience, *and changes them as a result.*”

The starting point for Aristotelian method, it will be recalled, is the *endoxa* – the world as it appears to the participants. Furthermore, the

*endoxa* are used as a check on solutions: an adequate solution must explain the *endoxa*. As such, Aristotelian method seems to meet Hedgecoe's requirement for an empirically rooted, bottom up approach. However, unlike the bottom up approaches of pure social science, and of some of the bottom up approaches in applied ethics, such as caring ethics, it retains a normative, critical edge; Aristotelian method enables us to move beyond description of *endoxa* to the resolution of puzzles in them. The next section outlines an example of how this might be done.

#### **IV An example of Aristotle's method applied to a case in bioethics**

It is not uncommon for hospital staff to be confronted by a young person, say, a twenty year-old man who has deliberately taken a drug overdose, perhaps following a disappointment in love (Hassan *et al*, 1999). He refuses life-saving treatment. The key decision here is whether to treat the man without his consent. If the decision is made not to do this, the next issue is of how much pressure to bear on him to change his mind. Thus, inquiry is stimulated by the need to make the decision and the presence of a puzzle. For hospital stuff the likelihood is that they will feel it would be a tragedy were they to let the man die; the “end of the world” injuries suffered by the lovesick young usually heal. However, the legal position seems to be against forcible treatment; and there will be those who would question the bringing of pressure on the man (e.g. through graphic description of his likely suffering, or of the suffering he will bring on others).

There are plenty of *endoxa* to draw upon here. Some have been outlined simply in describing the situation. There will also be beliefs derived from writings on informed consent. Many of these will focus on autonomy. The views of the wise are reasonably easy to elicit from writings specifically to do with autonomy or to do with related topics such as consent. Because autonomy is a fairly technical term, the views of the many are more recondite but can be extracted from empirical research on such things as informed consent (e.g. Mason & Allmark, 2000) and, perhaps, from general literature and from thought experiments.

The *endoxa* and puzzles that arise seem to be divisible into those to do with the nature of autonomy and those to do with its value. With regard to the nature of autonomy, the *endoxa* indicate that the term autonomy means “self-rule” and implies something greater than being unconstrained. The ability to rule oneself is such that most adults are autonomous, whilst animals, young children and the severely mentally ill are not. Similarly, adults acting from alien desires (such as those implanted in an unknowing agent through hypnosis) are not autonomous, at least in relation to those desires. The facility for self-rule possessed by most adults seems to have some relation to their rationality. Finally, there is some form of relationship between moral responsibility and autonomy. In particular, we do not hold agents morally responsible unless they are autonomous agents and, in general, unless their acts are autonomous.

On the value of autonomy, it seems that people do value their freedom to choose and their ability to do so; the loss of autonomy in an adult (through disease or accident) is viewed as a tragedy. In theoretical terms this is reflected in, for example, the principles approach through the principle of respect for autonomy.

However, the puzzle with which we began is reflected in these *endoxa* also. In the first place, there is the question of whether the man's decision to refuse treatment is an autonomous one. Some approaches, especially those influenced by Kant, would doubt that his choice is rational enough to count as autonomous and, therefore, worthy of "respect". Other approaches set less stringent criteria; in the UK the law sides with these approaches. Provided the man understands the consequences of his action, believes this information, and can retain and process it then he is "competent" (Kennedy & Grubb, 2000). The young man here seems to meet those criteria. Further to this, though, even if it were agreed that his choice is autonomous, there would be a question of whether autonomy is of such value that the man should be permitted to die in its name.

This gives us enough *endoxa* and puzzles. Aristotelian method requires now that we "make a new start"; we must move dialectically towards first principles with a view to constructing an account that resolves the puzzles and explains the *endoxa*. Fully to do this would require a further

paper; however, it is possible to offer some hints. We are looking for an account of the nature and value of autonomy. A good starting point might be the *endoxon* concerning moral agency and autonomy. In general we hold only autonomous agents to be morally responsible, and only for their autonomous actions. It is reasonable to posit that it is only moral agents who are autonomous rather than, say, animals. This takes us to a new realm: what is the difference between animals and humans such that only the latter can be held morally accountable? According to Aristotle, it is the presence of reasoned desire rather than just appetite. Humans develop views about what it is worthwhile pursuing; this is their vision of the good. As such, they are accountable not just for what they do but also for what they desire. It is this that is at the heart of moral agency and, therefore, of autonomy.

If we switch this back to the young man, we could ask whether his action is one for which we would hold him morally accountable: would we blame him? I shall simply assert that we would. His action is autonomous because it reflects his character. This tells us something more. Autonomous action can be wrong; it can reflect bad or weak character. Should we then respect the autonomous action of those who are not virtuous? Again, this takes us to a different realm. The question here is why we value autonomy. Stated very baldly, Aristotle would say autonomy is of value because of its place in a good, happy life. Autonomy is a necessary component of such a life for at least two reasons. The first is that a human cannot be happy unless he is

autonomous. This is because autonomy requires virtue, virtue is a state of moral character, and moral character is possessed only by autonomous agents. The second reason is that humans need to exercise autonomy in order to be happy. A virtuous agent unable to act would not be happy. Furthermore, non-virtuous agents need to exercise virtue in order to be happy. It is only through reflecting on such mistakes that agents can develop their vision of the good towards virtue.

Thus we have, in general, good reason to respect autonomy: to allow people to develop their character even though they may make mistakes. However, the fact that people can be mistaken suggests that the way respect for autonomy manifests itself will vary from case to case. We would respect the autonomy of people making what seem to be the right decisions unequivocally. By contrast, where people are making flawed decisions it is permissible in most cases to engage with them, to attempt to get them to see reason. Thus the health carers' should at least try and persuade the young man to change his mind is supported on this account. Whether or not they should override his decision is moot. Legally it is not acceptable, and that may be enough to decide against doing so. However, the man's decision may be seen as so flawed and so disastrous to his prospect of happiness that paternalism may be morally if not legally justified. Similar arguments might justify paternalistic legislation against, for example, some recreational drugs.

The discussion of the case here is, of necessity, very brief. It is not intended to be persuasive. The purpose of the discussion is, rather, to show the way Aristotelian method would proceed on a particular case or issue. *Endoxa* and puzzles are gathered and then an attempt is made to make a new start. In this case, that was done by looking to the ground on which we attribute moral accountability to agents, and by looking to the ground on which we attribute value to human action. Finally, there should be explanation of the *endoxa* and resolution of the puzzles. Two examples will suffice from the discussion here.

First, we began with the belief held by health carers that some form of intervention would be justified to prevent this man's death, be that intervention forcible or persuasive. This account has explained that belief by suggesting that while his action is autonomous it is also wrong; the carers are (at least) justified in attempting to get him to see reason. Second, we noted a clash of beliefs in relation to whether or not the man's action is autonomous. The Aristotelian account has come down on the side of saying that the action is autonomous. However, it also explains the belief that it is not by showing that, insofar as it is wrong, it is not fully rational. Before concluding, there is one further point in favour of the credibility and appropriateness of Aristotelian method.

**V. Aristotle's development and use of his method gives it some credibility.**

The final point is an appeal to authority. The method has credibility because it was developed and used by Aristotle. Aristotle's philosophy has stood the test of time; it is still widely debated and many aspects of it are defended. In that his philosophy is a product of his method, this suggests that the method is capable of delivering worthwhile results.

This second point depends on a premise that needs defence: that Aristotle does consistently use his method. The need to defend the premise arises because there are times when Aristotle appears not to use the method. One example is the way he appears to reject the lives of pleasure, honour, and moneymaking as candidates for constituting a happy life without trying to explain these *endoxa* (*NE* 1095b5-1096a10). Another example is the way voluntariness is simply defined as the opposite of involuntariness without any apparent attempt at dialectical argument (*NE* 1110a1).

A plausible response to this is that here Aristotle is relying on the conclusion of a dialectical argument that has been made in another work or at a different point in the same work. In the case of the definition of voluntariness the dialectical argument occurs in the *Eudemian Ethics* (Sauve-Meyer, 1993). At other times the dialectical argument occurs in the *Nicomachean Ethics*, but is scattered around. This is the case with the first example where, for example, Aristotle has an extensive

discussion of pleasure in Book VII: as such, he does not dismiss it as lightly as he seems to in Book I. Furthermore, we have already seen how Irwin argues that Aristotle's ethics uses many premises from elsewhere in the *corpus*. Thus, a defence can be made of the claim that Aristotle is consistent in the use of his method even though he appears occasionally not to be. This is reinforced by the fact that Aristotle does often lay out his argument in a way that shows precisely that he is using the method (Lear, 1988, pp. 4-5).

### **Conclusion**

This paper has argued that the application of Aristotelian method in bioethics is credible in that it compares well with alternatives and is able to respond to criticism. It has argued also that the method is appropriate, able to deliver results, through discussion of a specific example. Finally, an argument from authority was used to defend both the credibility and appropriateness of the method.

Two of the three steps of Aristotelian method are likely to be shared with non-Aristotelians. These are setting out of the endoxa and of the puzzles; the third step, the move to first principles that explain endoxa and resolve the puzzles, is more controversial. However, those who dispute it should consider the importance of explaining deeply held views. In particular, controversial conclusions are little more than rhetoric unless they draw upon deeper, non-controversial views. They are unlikely to be persuasive in the practical, decision-making realm of

bioethics. Conversely, there is a need to move beyond the beliefs people hold where those beliefs are confronted with puzzles; Aristotelian method shows how this can be done without becoming theory-led and isolated.

## **References**

- Anscombe, E.: 1958, 'Modern moral philosophy', *Philosophy* 33, 1-19.
- Aristotle (transl. Crisp, R.): 2000, *Nicomachean Ethics*. Cambridge, Cambridge University Press.
- Bäck, A.: 1999, 'Aristotle's discovery of first principles', In: *From Puzzles to Principles*. [Ed. Sim, M], Lanham: Lexington, pp. 163-82.
- Crisp, R (ed.): 1996, *How Should One Live?* Oxford: Clarendon.
- Dancy, J.: 1992, 'Caring about justice', *Philosophy* 67, 447-66.
- Dancy, J.: 1996, *Moral Reasons*. Oxford: Blackwell.
- Hardie, W.: 1980, *Aristotle's Ethical Theory* 2<sup>nd</sup> edition. Oxford: Clarendon.
- Hare, R.: 1975, 'Abortion and the golden rule', *Philosophy and Public Affairs* 4, 201-22.
- Harris, J.: 1975, 'The survival lottery', *Philosophy* 50, 81-7.
- Hassan, T *et al.*: 1999, 'Managing patients with deliberate self harm who refuse treatment in the accident and emergency department', *BMJ* 319, 107-9.
- Hedgecoe, A.: 2004, 'Critical bioethics: beyond the social science critique of applied ethics', *Bioethics* 4, 120-43.
- Hill, T.: 1995, *Autonomy and Self-Respect*. Cambridge: Cambridge University Press.
- Hursthouse, R.: 1987, *Beginning Lives*. London: Open University/Blackwell.
- Irwin, T.: 1988, *Aristotle's First Principles*. Oxford: Clarendon.

- Jonsen, A.: 1991, 'Casuistry as methodology in clinical ethics', *Theoretical Medicine* 12, 295-307.
- Kant, I.: 1997, 'On a supposed right to lie from philanthropy', Appendix in: *Kant's Critique of Practical Reason*, (transl. Guyer, P). Cambridge: Cambridge University Press (original publication in 1797).
- Kennedy I and Grubb A.: 2000, *Medical Law: Texts and Materials* 3<sup>rd</sup> edition. London: Butterworths.
- Korsgaard, C.: 1996, *The Sources of Normativity*. Cambridge: Cambridge University Press.
- Kuczewski, M.: 1998, 'Casuistry and principlism: the convergence of method in biomedical ethics', *Theoretical Medicine and Bioethics* 19, 509-24.
- Lear, J.: 1988, *Aristotle: The Desire to Understand*. Cambridge: Cambridge University Press.
- MacIntyre, A.: 1985, *After Virtue* 2<sup>nd</sup> edition. London: Duckworth.
- Mason, S and Allmark, P.: 2000, 'Obtaining consent to neonatal randomised controlled trials: interviews with parents and clinicians in the Euricon study', *Lancet* 356, 2045-51.
- McDowell, J.: 1979, 'Virtue and reason', *Monist* 62, 331-50.
- Megone, C.: 1997, 'Aristotelian Ethics', In: *Encyclopaedia of Applied Ethics* Vol. 3. London: Academic Press.
- Megone, C.: 2000, 'Mental illness, human function and values', *Philosophy, Psychology and Psychiatry* 7 (1), 45-65.
- Nelson, M.: 1999, 'Morally serious critics of moral intuitions', *Ratio* XII, 54-79.

- Norman, R.: 2000, 'Applied ethics: what is applied to what?', *Utilitas* 12 (2), 119-36.
- Nussbaum, M.: 1986, *The Fragility of Goodness*. Cambridge: Cambridge University Press.
- O'Neill, O.: 2001, *Autonomy and Trust in Bioethics*. Cambridge: Cambridge University Press.
- Popper, K.: 1989, *Conjectures and Refutations* 5<sup>th</sup> ed. London: Routledge.
- Reeve, C.: 1992, *Practices of Reason*. Oxford: Clarendon.
- Sauve-Meyer, S.: 1993, *Aristotle on Moral Responsibility, Character and Cause*. Oxford: Blackwell.
- Shelp, E (ed.): 1985, *Virtue and Medicine: Explorations in the character of medicine*. Dordrecht, Kluwer.
- Sim, M.: 1999, 'Introduction', In: *From Puzzles to Principles*. [Ed. Sim, M], Lanham: Lexington, pp. ix-xxv.
- Singer, P.: 1993, *Practical Ethics* 2<sup>nd</sup> edition. Cambridge: Cambridge University Press.
- Smith, R.: 1997, 'Introduction', In *Aristotle: Topics*. Oxford: Clarendon, pp. i-xxxii.
- Smith, R.: 1999, 'Dialectic and method in Aristotle', In: *From Puzzles to Principles*. [Ed. Sim, M], Lanham: Lexington, pp. 39-56.
- Thomson, J.: 1971, 'A defense of abortion', *Philosophy and Public Affairs* 1(1), 47-66.
- Whiting, J.: 1988, 'Aristotle's function argument: a defense', *Ancient Philosophy* 8, 33-48.