CONSCIENCE

IN THE MENTAL HEALTH PROFESSIONAL

from moral development to medical ethics

with excursions in moral philosophy

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Part One

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presented by M.Galvin

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SECTION WHO, HAVING CONTINUOUSLY TO RESPOND TO AND
WEIGH OUR CLINICAL, TEACHING, RESEARCH, AND
ADMINISTRATIVE DUTIES, CHOOSE TO PROVIDE THE MOST
CRITICAL KIND OF IN-KIND SUPPORT --PROTECTED TIME-- FOR
THE CONSCIENCE PROJECT.

PART ONE

I. INTRODUCTORY COMMENTS

   I had thought to entitle this presentation 'On Beyond Conscience'.
I decided not to because 'On Beyond Conscience' invites comparisons with
particular 'Beyond' books--oh, for example, BEYOND GOOD AND EVIL by
Friedrich Nietzsche or BEYOND FREEDOM AND DIGNITY by B.F. Skinner or
BEYOND THE BEST INTERESTS OF THE CHILD by Solnit and Freud. Actually
there is only one 'Beyond' book with which I wish to invite comparison: ON
BEYOND ZEBRA by Dr. Seuss.

   Many children we have known either because we have been their parents
or their therapists have derived great pleasure from ON BEYOND ZEBRA.
Parents will readily recall that the premise of On Beyond Zebra is that the
alphabet need not stop with the letter Z. Fantastic letter-characters festooned
with strange loops are added to the alphabet. Each letter-character is
represented with an equally fantastic creature.

   In this book, Dr. Seuss captures for children the essence of
Shakespeare's admonition put in the mouth of Hamlet: There are more things in
heaven and earth than are dreamt in your (read for 'your': 'anyone's') philosophy.
Let us take both Dr. Seuss and Shakespeare to heart and consider first the limits
of the study of conscience as it has been presented periodically in Grand Rounds
over the years, recognizing that some limits are inherent in the method of the
study while others are limits imposed by such factors as time dedicated to
research, interest and support from academia and availability of research
funding, not to mention the dominance of value neutrality in science and more
recently in (managed) health care. Each of these factors contributes a valuational
vector to the advancement or the obstruction of the study of conscience.

First, I have a short story to tell. At one of the clinical sites where I work, they used to insist upon, for a while only grudgingly tolerated, and then finally actively discouraged the dictation of (outpatient) psychiatric evaluations. It was during the time when dictations were still being typed that I would repeatedly have an odd experience. When I came to the Mental Status Examination part of the evaluation I would dictate something like "Billy could not readily identify his inner states" or " Mary was able to describe her inner states in detail." Now, invariably "inner states" was transcribed as "interstates." And, in spite of my repeated efforts to correct the situation, the error persisted. Eventually, I resigned myself to my fate and perhaps even ceased, myself, to make much of a distinction between inner states and interstates. In the meantime, my work shifted from biological investigation in a single setting to clinical practice at various venues. I found, as I traveled from hospital to hospital on the interstate, I had time to wonder about the status of inner states-- what had become of them? Inside and outside, are they one and the same side though they don't seem that way at all--like a Möebius surface? It has always seemed a strange loop.

Disclosures. I have forgotten to make my disclosures. These are, unfortunately, not funding source disclosures. They are, instead, disclosures about bias and basis. The first disclosure is this: I am persuaded that psychology has suffered long enough from a reduction of inner states to just two respectable ones: cognitions and affects. I suppose I should be grateful that any inner states have had their respectability restored after what happened to them historically.

[Illustration A: A Brief History of the Psychology of Conscience]

A Brief History of The Psychology of Conscience

Thought - Emotion - Value - Volition - Action

(Thought - Emotion - Value - Volition)   Action

Behavior

Ye OLde Black Box
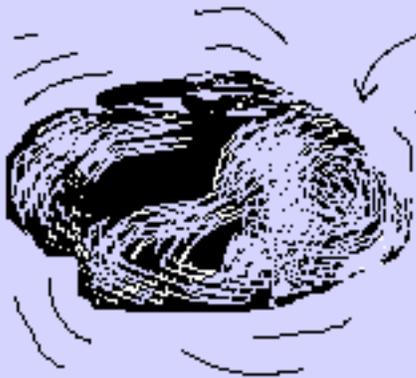
Behavior
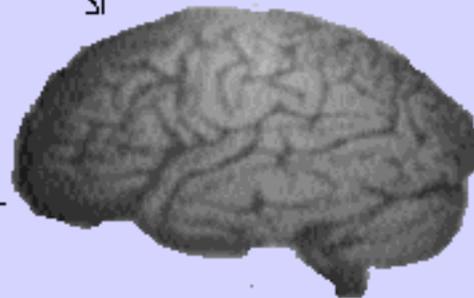
Cognitive-behavior
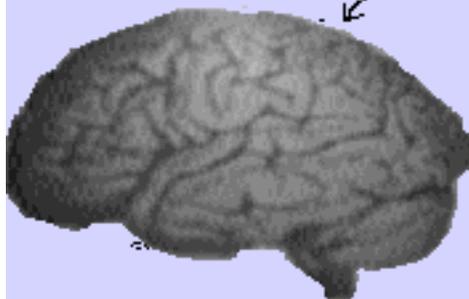
Cognitive-**Affective**-behavior
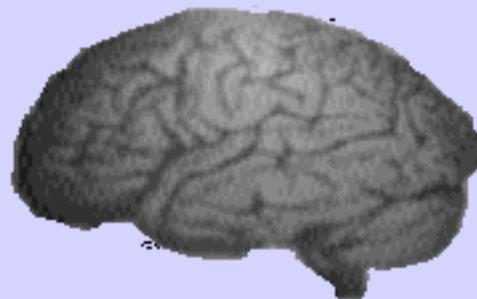
Cognitive-Affective-**Valuational**-**Volitional**-behavior.

I need also to disclose my bias that we would do better to accept the irreducibility of at least the following inner states: thinking--feeling--valuing--willing. Each I will treat as irreducible to the others. None will I treat as existing independently from the other. Moreover, I will be dealing with them as contextualized in moral development. The study of valuing (axiology) is characterized in the slide.

[Illustration B: Axiology]

Other theoretical biases--bases-- for this presentation, which I will disclose to you now are:

> Discrete Emotions Theory (Darwin, Izard, Nathanson),
>
> Attachment Theory (Bowlby),
>
> some elements of Psychodynamic Theory,
>
> some elements of Learning Theory, and
>
> Developmental Stage Theory.

AXIOLOGY

PRAGMATICS
AESTHETICS
ETHICS

VALUES§
*INTRINSIC
the value x has in itself apart
from whatever it leads to or its
further consequences
* INSTRUMENTAL
a function of the intrinsic
value to which x will lead
* ORIGINATIVE
value newly introduced into
the world, not presaged by or
fully counted in previous
instrumental value
* CONTRIBUTORY
the difference x makes so that
the slack of its absence would
not be taken up by other
factors such that the same
value is produced anyway

VALUATION
* VALUE SEEKING
*VALUE MAKING
* VALUE KEEPING

§ Nozick, R. (1981): Philosophical Explanations. Belknap
Press, Harvard University, Cambridge, Mass. pp311-314.

THE CONSCIENCE PROJECT

We have provided a handout regarding conscience domains. Research conducted with normal children and adolescents (ages 5-17) has identified five domains of conscience functioning (Stilwell & Galvin, 1985; Stilwell, Galvin & Kopta, 1991; Stilwell, Galvin, Kopta, and Norton1994; Stilwell, Galvin, Kopta and Padgett, 1996, and Stilwell, Galvin, Kopta, Padgett and Holt, in press).

CONCEPTUALIZATION OF CONSCIENCE (Stilwell, et al., 1991) measures the degree of inclusiveness and abstractness a person utilizes when providing a personal definition of conscience. Five transformations in conceptualization of conscience occur between the ages of 5 and 17. The most salient feature of each has been incorporated into the name of the stage:

EXTERNAL CONSCIENCE (age 6 and under),
BRAIN OR HEART CONSCIENCE (ages 7-11),
HEART/ MIND OR PERSONIFIED CONSCIENCE (ages12-13),
CONFUSED CONSCIENCE (ages 14-15), and
INTEGRATED CONSCIENCE (ages 16- 17).

Stage transitions in the other domains are anchored in the domain of conceptualization of conscience.

MORALIZATION OF ATTACHMENT (Stilwell, et al., in press) measures developmental transitions in the youngster's response to parental prohibitions and demands based upon how s/he links feelings of security, empathy and oughtness to child-parent and other child-authority figure relationships.

MORAL-EMOTIONAL RESPONSIVENESS (Stilwell et al., 1994) measures developmental transitions in the way a child uses 1) anxiety and mood to regulate moral behavior and 2) processes of reparation and healing after wrongdoing to regain the physiological state normally experienced when feeling like a good person.

MORAL VALUATION (Stilwell, et al., 1996) measures developmental

changes in the way a child justifies compliance or noncompliance with rules of conscience based on both reasoning and psychological defenses. This domain has three sub-domains based on how the child categorizes rules of conscience as authority- derived, self-derived and peer derived.

The last domain, MORAL VOLITION currently under analysis, measures developmental transitions in how a child uses his/her sense of autonomy in responding to and redefining rules of conscience.

Our findings based upon semi-structured interviewing of older children and adolescents are consonant with those of other investigators who have established a meaningful correspondence between younger children's narrative interpretations of hypothetical moral dilemmas and objective measures of their conscience functions. These investigations established that the "declarative knowledge" expressed in narrative form was associated with both past and contemporaneous "procedural" action tendencies and with maternal reports. Toddler to preschool age children's consciences were measured objectively at time #1 (ages 26 to 41 months) and again at time #2 (43-56 months), and narratively at time #2. Although the age ranges were relatively restricted, there was evidence of cross-sectional developmental trends, as well as strong differences between time #1 and time #2, congruent with most theories depicting moral development as a gradual shift to more internalized regulation, growing empathy, and awareness of wrongdoing. Older preschoolers expressed more themes of empathy and guilt, more themes of confession/reparation and fewer antisocial themes (Kochanska, Padavich and Koenig, 1996; also see Kochanska, 1991 and 1993). So, here is a map of where we have been and where we might go -- an effort to convey the overall impression that there is so much left to do and so little time in the collective lifespan of our own scholarship in which to do it.

Currently, an adapted version of the Stilwell Conscience Interview (SCI) is being used to study conscience development under adverse conditions following the 1988 earthquake in Armenia (Goenjian, personal communication). The

effects of early maltreatment on conscience development have also been studied. Subjects who endured early maltreatment had developmental delays and interferences with functioning in more conscience domains than those who were either spared such experiences or who endured maltreatment later in life. Correlations among neurobiological and moral psychological sequelae of maltreatment provide hints regarding the developmental psychobiology of conscience (Galvin, Stilwell, Shekhar, Kopta, and Goldfarb, 1997).

"On beyond" our particular study of normal conscience there may lie such things as a better understanding of the psychobiology of conscience, a longitudinal, prospective study of conscience development, conscience in the family and conscience across generations, conscience development in older age groups, conscience across cultures and across socioeconomic strata, conscience in adversity and conscience in crisis. I think also that the study of conscience more readily than current moral developmental psychology lends itself to investigation of various conscience malformations, for example racist or sexist conscience functioning.

Today, though, we will discuss some things that truly do lie on beyond conscience itself, nonetheless with definite bearing on our concerns in raising children who flourish as human beings and in guiding mental health professional students. So far I have introduced the metaphor of a strange loop in reference to inner states and interstates. Via what may appear at first to be a very strange loop we will go on beyond conscience, beginning with a case vignette, then reflect upon the relationship of moral developmental psychology to moral philosophy and both of these to ethics in medicine only to arrive once again at conscience, but conscience transformed into the mental health professional conscience. Subsequently, I will enlist the aid of a second metaphor: a bridge as one way that conscience can be conceptualized: a bridge between inner states, a bridge between fact and value. I hope to make you comfortable examining and using the concept of conscience not only towards the end of having a fuller understanding of patients but also, in the form of the mental health professional conscience, as a bridge to health professional ethics.

II. CASE VIGNETTE:

A MORNING IN THE LIFE OF DR. EVERY PERSON

DR. PERSON began her workday early by rounding at the adolescent psychiatric unit of the community hospital. She greeted the unit manager who buzzed her in through the locked door. This had become a routine between them. Dr. Person's arrival was highly predictable, within a five-minute span. On the other hand, she never seemed to predict the need for the key she had been issued, and so, invariably stopped just outside the door to fumble around for it in her purse and turn out her coat pockets. With somewhat less but nonetheless fairly high reliability, Dr. Person's pager would go off at just this time, with the usual effect of accelerating her fumbling and her burning her lip on the coffee as it lapped over the edge of the styrofoam cup she held clenched between her teeth.

She generally considered herself obliged to turn her pager on before she left home, sometimes there was a flurry of pages while she traveled the interstate, persisting until she had reached the unit. There was a time when she prided herself on being responsive to pages within 15 minutes--20 tops. She could remember her residency days when she would even exit the interstate to search for a pay phone in unfamiliar neighborhoods. She had decided not to do that anymore. She didn't care for cellular phones. She didn't think she (or anyone else for that matter) could adequately attend to her driving while using one, she didn't like the intrusion on what she had come to regard as time for CME and, moreover, she thought the hospital should pay for a cellular phone if they wanted her so badly that they couldn't wait for her to get there. So sometimes she didn't respond to pages even within an hour --but really these occasions were rare. Even in therapy she usually excused herself to respond if the page came more than once, made the call indicated on the display, informed the caller that she was in a session and would get back later. Usually that was enough. In the event

of a family emergency she was confident that she would be interrupted and informed right away. In the course of her supervision as a resident, she had learned to discuss ahead of time with her patients how she would deal with intrusions upon the therapeutic process--intrusions like pages, phone calls, knocks on the door. "That was a good thing", she thought. "One of the many casualties of managed care!" There were some exceptions to her rules regarding the pager, for example during critical therapy sessions she had been known to turn her pager off. How did she judge which were the critical therapy sessions? She really couldn't come up with a ready answer how she made that determination.

Once on the unit she found her way to the work station in the back, registering that a person she did not know and a mental health technician she did know and especially appreciated for her blend of firm limit setting for-- and empathic responsiveness to-- patients. They were engaged in an animated discussion, words like 'downsizing' and 'collaboration' crested in her incomplete auditory experience of their conversation. That reminded her of a committee meeting she was expected to attend. The head of her Section had appointed her to a work group on facilitating the blending of hospital families. "Of course that means disowning some of the family members," she allowed herself a cynical thought. She glanced again at the stranger and the ward staff, "The anxiety about this merger --collaboration-- (she corrected herself) is nearly palpable. Well I don't want to be involved." She wondered if she could ask Irene the unit manager to page her out of the work group meeting. " I'm here to see patients, not set administrative policy," she muttered under her breath as she pulled the chart of her first patient.

The patient was a 16-year-old girl who was diagnosed with depression not otherwise specified (Dr. Person wondered briefly about her diagnostic acumen-- couldn't that diagnosis have been more sharply made? She hadn't asked all the questions she needed to in order to rule out Major Depressive Episode and Dysthymia. What about bipolar disorder? Hadn't considered that. Others had. This kid had big time diagnostic density. Well Depression NOS is good enough

for the insurance companies...). It was a deeply ingrained habit for Dr. Person to review the record beginning at her last entry. She did not deviate from that routine today. She came across the utilization reviewer's note, which reflected that the reviewer had been in touch with the insurance company. No more days without physician contact. She recognized the physician reviewer's name. "Damn. He wouldn't authorize a New York minute unless I prescribe medication-- the one he likes for sexually abused, delinquent, multiple runaway girls." They had had these discussions before. Dr. Person had made it a point to moderate the indignant tone she adopted the first time she had been told what medication to use. What had she said in the heat of her anger? Something like "I fully expect you will send me the double-blind placebo controlled studies you have on file to back your claim for this medication." She might not say so but she valued equanimity and composure and also a spirit of reaching a compromise. Still she would have been delighted if a militant group of irate patients could successfully sue the pants off the whole lot of physician reviewers for malpractice. Well, she could see her way clear to prescribing some kind of medication--maybe not the kind Dr. Reviewer prefers-- but some kind of medication for the kid. But in this case the kid was refusing medication altogether. The kid had a choice, didn't she? And really, more than medicine, this kid needed intermediate length hospitalization or a therapeutic residential setting. The outpatient, the partial hospitalizations, the home based services and the two previous acute hospitalizations just hadn't worked. The family was in chaos. This kid was severely and persistently mentally ill if ever a kid was. Dr. Person flipped over to the next page to the social worker's note:

" Contacted Ms. So and So at such and such mental health center requesting that the local coordinating council reconvene to consider a more restrictive longer term placement for this child. Follow up call made to State Hospital Youth Services, waiting list is 6 mos. Follow up call made to DPW, previous designation of CHINS was dropped 1 year ago after reintegration into aunt's home. Therefore no funding source readily identifiable for residential placement." Dr. Person allowed herself a sigh as she closed the chart and went into the dayroom to find

her patient.

Dr Person's patient wasn't in the dayroom. She had been secluded and restrained earlier that morning for escalating disruptive behavior (throwing her breakfast tray at a nurse), followed by an attempt to injure herself. The nurse told Dr. Every Person her patient denied any suicidal intent behind her self-injurious behavior but wondered about upgrading the suicide precautions a level, anyway. Dr. Person thought first about the duration of time to continue the restrictive intervention and decided on "up to 4hrs with release after 1/2 hour calm and able to process what had occurred." The precautions were another matter. Dr. Person was good at systematically weighing the risk factors for suicidality.

She considered that the attenuation of suicidal (and other) impulses varied according to affective, cognitive, defensive and volitional conditions which could be clinically judged from the history and the direction of changes evident on the mental status evaluation conducted daily. In Dr. Person's acute psychiatric program, the patient's suicidality was assessed, then work begun to reduce or eliminate maladaptive conditions and strengthen or introduce adaptive ones. Dr Person was generally governed by healing values, reckoning from clinical experience what was most adaptive. She was on the lookout for (and unequivocally on the side of) her patients having a full range of human emotions, versatile social problem solving skills and cognitive control of emotions, life affirming and generative values about self and others, self reliance, regulated self disclosure and appropriate help seeking, mature defense mechanisms, an internalized locus of control and a history of deliberate choosing with assumption of responsibility for the consequences of the choices made. All this she saw as adaptive, i.e. she positively valued (and, moreover, she recommended her patients do likewise). In contrast, psychopathological or maladaptive interference would be discerned in a constricted range of emotions, high levels of background rage, failure to stop and think (an impulsive cognitive style) or an absence of alternative, means/end and consequential thinking, absence of life affirming and generative values or presence of destructive values about self and others (more and more she suspected depression as being a valuational, not just a mood,

disorder the psychobiology of which involves an uncoupling of the facts and values in a person's life), identification of suicidal behavior as a coping strategy as in escape, reunification and retributive fantasies, reliance upon primitive defense mechanisms such as repression and projection, denial and minimization, an external locus of control, assumption of victimhood and a development impoverished in deliberate choosing and responsibility taking. Now Dr. Person knew where this kid was at, and she would try to persuade Dr. Reviewer on the grounds of cost efficiency that the kid should stay in the hospital until she had at least made some preliminary connection with her life affirming values, i.e. had come up with some reasons to live and, in accordance with those, a survival plan. Dr. Person wondered if Dr. Reviewer would approve additional days if the kid's self-injurious behavior could be interpreted as suicidal.

COMMENTARY

When facing a decision about complex issues, a person is often advised to "consult his/her conscience". What does this mean? In particular, what does it mean for a person entering one of the health care professions--when choosing a career, in the midst of the training program, becoming established in community practice, or working in a teaching, mentoring or research role? The health care field grows in complexity each year. as do external efforts to control complexity, through regulations and practice guidelines established by government agencies, professional organizations, or health maintenance organizations. While these external efforts may in some ways support "the ethical fitness" (to use Kidder's felicitous term--see reference below) of health care professionals, there may be other ways in which this externalization actually undermines and reverses the process of internalization of conscience functions which began in the professional's childhood --to the detriment of both the professional and his/her patients.

Conscience formation begins in childhood and continues throughout the lifespan. Empirical studies of conscience development during the formative years

of childhood and adolescence demonstrate that there are moral aspects to many domains of development, each contributing different dimensions to one's personal moral system. There are moral dimensions of attachment experiences, the regulation and balancing of emotions, the development of reasoning and psychological defenses--all against a background of being engaged by wonder. Values honoring the human experience, learned in relationship to authority figures, in one's community of peers as well as in self-discovery, also determine the issues of conscience toward which one becomes willing to exert his/her moral energies.

One may begin preparations for a life as a health care professional naive to the moral dimensions of self that led to career choice and even more naive to the moral dimensions inherent in medical training and practice. Unless the moral dimensions of self-development, i.e., the development of a professional conscience, are emphasized during the training years, graduates may exit programs still naive to transformations that have occurred in themselves as a result of exposure to morally complex medical issues. Moral dilemmas in practice may lead to decisions that should have been preceded by further moral examination.

Medical school, residency, psychology internship, nursing school, occupational and physical therapy and other allied health professional schools pose extreme challenges. While not necessarily experiences of adversity, the challenges posed by health professional schools nonetheless have in common with experiences of adversity, the characteristic of subjecting developing human beings to intermittent and sometimes prolonged periods of stress. Facing and mastering adversity is generally seen as conducive to ethical fitness. However, empirical studies in children who have been maltreated suggest there are times when adversity undermines rather than refines ethical fitness. Is there also an 'inverted-U' shaped curve for the salutary effects of health professional school challenges to the development of professional conscience?

How are we to understand and to enhance the moral development of beginning healthcare professionals, to stimulate their thinking as well as the

thinking of those who teach them regarding the moral dimensions of self that motivate involvement in a healthcare profession? How are we to learn what changes occur in the way they think and respond to moral issues connected to medical decisions in the course of training? Empirical research with respect to ethical fitness in the health care professional community will be invaluable in deliberations of regulatory policy makers who are concerned to preserve the integrity of the professional conscience.

III. FROM THE DEVELOPMENTAL PSYCHOLOGY OF MORAL REASONING TO CONSCIENCE.

[Illustration C Map of Köenigsburg]
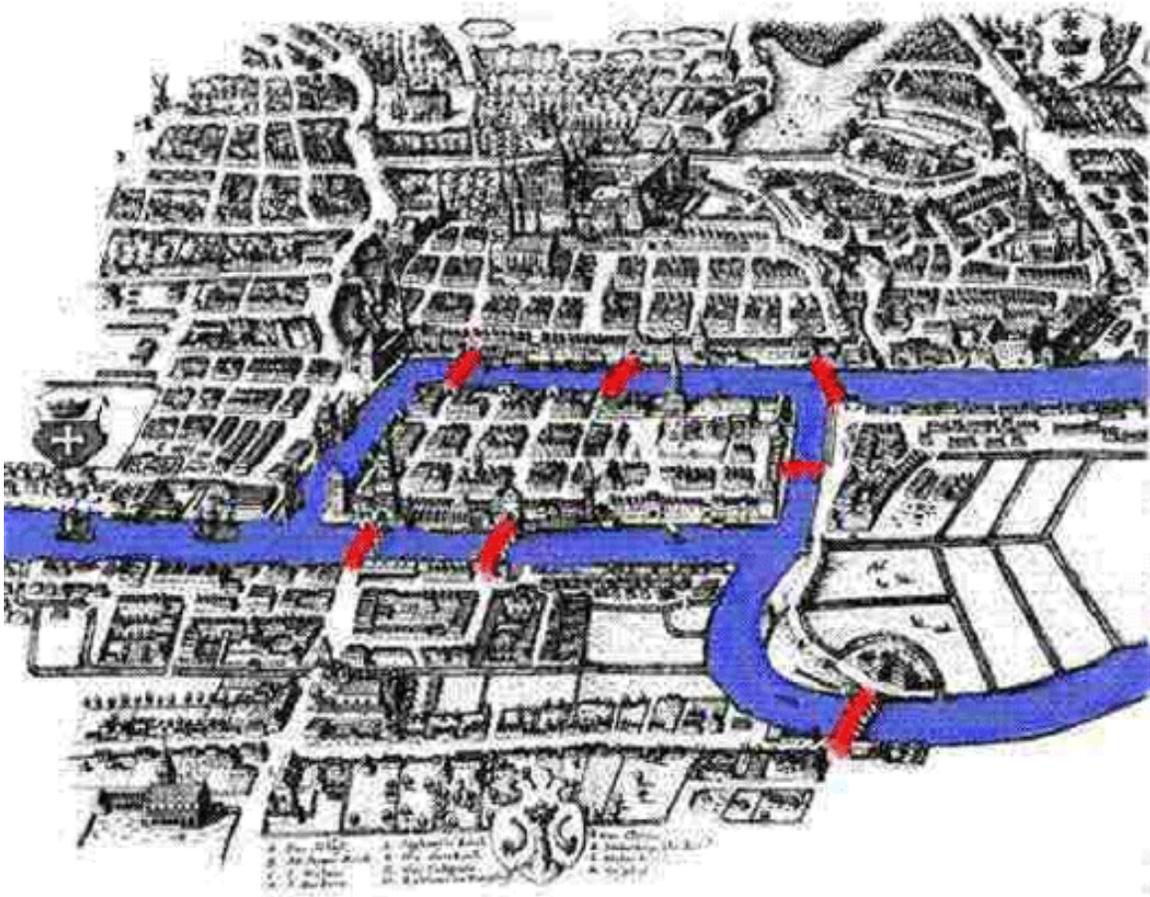
Köenigsberg is a town famous for at least two things. The first is the topographical puzzle of how to cross its seven bridges one time and only one time each. This fascinated the mathematician Euler. The second is a person, the philosopher Immanuel Kant (1724-1804). Kant stood 5ft tall and his personal life has been described as 'the most regular of regular verbs'. His parents were lower middle class, industrious and deeply religious, as Kant, himself, remained all his life. He was a local boy who attended the University in his hometown. He studied classics and theology and then physics and philosophy. Early in his career he did original work in astronomy and physics. However, his principle work is The Critique of Pure Reason, which embodied what Kant called his "Copernician Revolution" in the theory of knowledge.[2] Kant took seriously David Hume's critiques of current theories of knowledge. He wanted to answer Hume's criticisms of the claims of science and to show that an a priori knowledge of nature is possible.[3] In essence he saw knowledge as a cooperative affair in which both mind and object make a contribution. Certain ways in which the mind organizes experiences, fits experiences into categories, can be known prior to any particular experience. The following analogy has been used:

> Suppose we have a machine for sorting oranges that consists of an
> inclined plane with holes of various sizes. Oranges rolling down the
> surface of the plane fall through the holes into boxes underneath. If
> one of the holes is say two and one half inches in diameter, then no
> orange greater than that diameter will fall through to the box underneath....
> Although there are many things about the oranges that we could not tell
> without examining them... we can know something about their size.... [4]

Kant was also interested in providing an account of values that he believed lay outside scientific or matter of fact knowledge[5] (Jones, 1980). Kant gave three formulations of his categorical imperative, one of which, the second, is quoted here:

"So act as to treat humanity whether in thine own person or that of any other, in every case as an end withal, never as a means only"[6]
(Kant, translated H.J. Paton, 1964).

We'll get back to moral philosophy shortly--there is a loop within a loop here to follow first-- from Kant to Piaget, with whom we take up developmental psychology. Piaget was very attracted to philosophy, in particular to Bergson and to Aristotle, but the similarity of his structuralism to that of Kant is especially noteworthy[7] (Elkind, 1980). Piaget is known for his cognitive developmental psychology in which he saw intelligence as a biological adaptation with a logical substructure that unfolds in a series of epigenetic stages. By epigenesis is meant that growth and development are not preformed but rather, are sequentially created. At each stage in development the preceding structure writes the program for the next succeeding structure, however there is also an emergent character to the next stage.

Piaget identified the processes of assimilation and accommodation as the means by which the child advances through cognitive stages from sensorimotor to formal operations (Piaget, 1976; Elkind, 1980). His ideas are really not so strange to us who have been reared with physical theories that tell us that matter tells space how to be shaped and space tells matter how to move, or that observation itself alters the probabilistic character of observable phenomena. However the concept of developmental emergence of organic wholes greater than the sum of their parts transforming without loss of identity and having the capacity for self regulation (homeostasis) still vie with mechanistic and reductionistic explanations.[8]

Like Kant, Piaget was not just interested in how knowledge is possible in the relationship of the knower to the known. He was also interested in practical or moral reasoning. So, naturally, he went off to the mountains to see how Swiss children played marbles together.

More precisely he wanted to find out what changes occurred in their understanding of, acceptance of, and exceptions allowed for, rules in the game. Piaget anticipated game theory- one example of which might be the amusing but externalized conscience depicted in the poster shown earlier. There are similarities in playing games like marbles and learning moral rules but there are also differences, important ones, which cannot be captured by game-theoretic suggestions that morality is reducible to rational self-interest (egoism). Indeed, even if one is committed to a position that rational self-interest is, or should be, the sole basis for making choices, he or she is still going to have puzzles with strange loops. Consider the prisoners' dilemma as if it were your own.

[Inset 1:

THE PRISONER'S DILEMMA

THERE ARE TWO PRISONERS ACCUSED OF CONSPIRING
AGAINST THE STATE.

THE JUDGE GIVES EACH TWO ALTERNATIVES :
TO CONFESS OR NOT TO CONFESS.

IN A PLEA BARGAINING ARRANGEMENT,
THE JUDGE OFFERS A DEAL:

IF ONE PRISONER CONFESSES AND THE OTHER DOES
NOT, THE CONFESSOR WILL BE RELEASED AND THE
OTHER WILL GO TO PRISON FOR TEN YEARS.

IF BOTH CONFESS, BOTH GO TO PRISON FOR FIVE
YEARS.

IF NEITHER CONFESSES, BOTH GO TO PRISON FOR A
YEAR.

REFERENCE: Attributed to the Princeton mathematician, Albert Tucker in
a 1950 lecture on game theory. Version cited appears in Kidder (1995), an
alternative version with references to the literature on game theory
appears in Nozick (1981).   **]**

Historical dramas provide some compelling examples of persons
balancing game playing and an essentially moral life which puts them in constant
jeopardy: Thomas More's resort to legalisms as depicted in A Man For All
Seasons, Oskar Shindler's various ploys and deceptions to save Jews as
depicted in Shindler's List. A less dramatic example is the mental health care
professional working under a managerial structure that proves to be highly
insensitive to virtuous practice conforming to healing values. The initial
recommendation to find different managers becomes less and less an option as
corporate medicine devolves to more and more survivalistic values, and an
insensitivity to virtuous practice becomes more and more commonplace. To what
extent might such a mental health professional become "game" in the service of
his or her conscience? [9]

Eventually, Piaget (1965) began posing some dilemmas with moral
characteristics to children of different ages to see how they reasoned morally, for
example, about intentionality. He proposed two stages of moral development, the
heteronomous and the autonomous. In the heteronomous stage, rules are
explained as having authorship in some ultimate authority; in the autonomous
stage, rules are explained as having been derived from mutual agreement and
are amenable to change. Kohlberg extended the use of moral dilemmas, the
most famous of which is The Heinz Dilemma.

[Inset 2:

THE HEINZ DILEMMA

HEINZ'S WIFE IS DYING OF CANCER AND NEEDS A DRUG THAT
AN ENTERPRISING DRUGGIST HAS INVENTED. THE DRUGGIST
DEMANDS SUCH A HIGH PRICE THAT HEINZ CANNOT RAISE THE
MONEY. HEINZ'S DILEMMA, THEN, IS WHETHER OR NOT TO
STEAL THE DRUG TO SAVE HIS DYING WIFE.   **]**

Kohlberg (1981) combined the concepts of cognitive development and moral philosophy into a stage theory of moral reasoning. He postulated three levels each with two sub-stages. Pre-conventional moral reasoning is motivated by fear of punishment, desire for reward, and ideas of instrumental exchange. Conventional moral reasoning is motivated by understanding the roles of goodness (good child, good parent, good worker, good citizen, etc.) and achieved through compliance with established family and societal rules and law. Post-conventional moral reasoning is motivated by an understanding of universal principles, applicable to all human beings. Kohlberg saw justice as the ultimate moral principle. Gilligan (1982) found the conjoined principles of interpersonal care and responsibility to be more pertinent to women's lives (Stilwell et al., 1991).

[Inset 3:

KOHLBERG STAGES

Stage 1
Punishment & Obedience

Stage 2
Individual/Instrumental

Stage 3
Mutual Interpersonal
Relationships & Conformity

Stage 4
Social System & /Conscience
Maintenance

Stage 5
Prior Rights & Social Contract

Stage 6
Universal Ethical Principles   **]**

Kohlberg's theory of moral obligation is cognitive developmental, that is, the development of the idea of moral obligation is related to general skills of rational reasoning. Kohlberg's theory, like most theories with vitality, underwent revisions before his death in 1989. No doubt, what comprises the definitive version will be disputed for some time. A full critique is beyond what we can accomplish in this presentation. {Critical commentary may be found among the references, provided in the annotated bibliography. In particular: Shweder, Mahapatra and Miller's contribution found in Kagan and Lamb (eds), 1987, and Rest's own contribution in Rest and Narvaez (eds), 1994.} Some questions that have been posed, nonetheless, deserve mention. First, is cognitive development stage like? Shweder et al. argue that human cognitive growth is not very stage like and no single cognitive stage (Piagetian preoperational, concrete operational or formal operational stage) is a characteristic of an individual's cognitive functioning--it may depend on what one is thinking about and how the problem is presented. Likewise doubts have been raised about whether moral growth is very stage like. Apart from this, to the extent that staging warrants being done, can it be done without entailing value judgment?

Patterns of moral development have been described as hierarchical stages ---a term that has been criticized as being freighted with valuational judgment taking form in descriptors such as "more mature", " more adaptive",

"higher level" or simply "better". Rest (1994) argues that all that is meant by being at a "higher stage" is being in a better position to make sense out of the world and derive guides for decision-making. Rest denies that a meaning of higher moral status is intended. Nonetheless, there is something compelling (i.e. having an 'oughtness' of its own) about a developmental descriptor like 'better' with an intimation that it marks a trajectory towards an ultimate if unattainable good or perfection. One may ask, following Williams' lead (see endnote #12)." How much valuational thickness does the concept of development have built into it?"

Almost at antipodes to the critique of staging as thinly veiled value judgment, others criticize Kohlberg's methodology for reducing the study of moral concepts to the study of verbal justification of moral ideas, a skill which highly moral persons may lack. On the other hand, Kohlberg has been defended on the grounds that in his reformulated theory he expresses the view that his is not a complete theory of moral development but rather a theory of justice reasoning.

Kohlberg's theory of moral obligation is cognitive developmental, that is, the development of the idea of moral obligation is related to general skills of rational reasoning. There are alternative theories. From the psychodynamic quarter, Henry (1983), for example, viewed the stage theory of moral reasoning as limiting itself to measuring levels of sophistication of the rationalization defense mechanism. Elsewhere we have reviewed the literature on the importance of moral emotion in addition to moral reasoning (Stilwell, et al, 1994). Turiel, Nucci and Smetana's social interaction theory proposes that the development of the idea of moral obligation is related to social experiences with a restricted class of events that have objective or intrinsic implications for justice, rights, harm and the welfare of others. Moral obligation and the idea of conventional obligation are both present universally and differentiated from each other in early childhood. Another alternative is the social communication theory articulated by Shweder et al. They perceive Kohlberg (but see Blasi's commentary upon Shweder et al in the same volume) as having rested his later stages (5 & 6) wherein emerge the genuine understanding of the idea of moral

obligation, upon earlier stages (3 & 4) that are convention or consensus -based. Social communication theorists question that there are universal developmental processes leading the child to differentiate and contrast moral versus conventional obligations.

Another question has been: is the (Kohlbergian dilemma) test biased in favor of Westernized elites? The finding of rare postconventional thinking in the human species (it has been estimated that, on a worldwide scale, only 1 or 2% of all responses are purely postconventional) has raised methodological and conceptual concerns about Kohlberg's theory (Shweder et al., 1987).

Shweder et al conducted cross-cultural research. They compared 180 American adults and children from Hyde Park, 180 Brahman Hindu adults and children and 120 Hindu adults and children who were members of the castes designated by the government as "scheduled" living in Bhubaneswar, Orissa, India. They presented thirty-nine behavioral cases, representing a range of family life and social practices developed on the basis of ethnographic knowledge of community life in Bhubaneswar and Hyde Park. For example,
" A widow in your community eats fish two or three times a week." Then they asked questions of the informants aimed at assessing the existence or nonexistence of an obligation and its perceived importance, whether the obligation was regarded as having a moral character or was simply regarded as a convention, and how it was perceived according to the dichotomies: universal vs. relative, and unalterable vs. alterable. Of the thirty-nine cases, American and Brahman adults displayed similar judgments of right versus wrong concerning 10 practices and disagreement concerning 16 practices. For 11 other practices there was disagreement in one or the other community about what was right or wrong. However, several culture specific wrongs were seen by the Brahmin informants as more severe transgressions than many of the events viewed as wrong in both cultures. In the Oriya Brahman community it was considered wrong for a doctor at a hospital to refuse to treat an accident victim because he was too poor to pay but that transgression was not quite as serious as a widow eating fish, a relative eating beef, or the firstborn son cutting his hair the day after his father's death.

They interpreted their findings to favor the view that moral events cannot be distinguished from conventional events on substantive grounds. Nonetheless, they believed themselves to have discovered some principles and practices to be strong candidates for universal features in any moral code--namely:

> keeping promises,
>
> protecting the vulnerable,
>
> avoiding incest,
>
> fair allocation/justice,
>
> reciprocity and
>
> respect for property

as virtuous; and arbitrary assault, nepotism and biased classification as vices. Third they found that it is not a universal idea that social practices are conventional formations, deriving their authority from a culture-bound consensus. Unlike Americans, not all people have a place in their view of the world for the idea that social practices are conventions. There may, however, be context-dependent moral thinking evident. Post conventional moral conceptions of obligation represent the dominant mode of rule understanding held by all informants, Indian and American, child and adult, male and female. The post-conventional emphasis in the study population in America is on the natural right to free contract, personal choice, and individual liberty. The post-conventional emphasis in the study population in India is on the natural duty to respect the truths of Hindu dharma, which concern the justice of received differences and inequalities, the moral implications of asymmetrical interdependencies in nature and the vulnerabilities and differential rationality of social actors. The social communications theorists do not deny the universality and functional significance of moral emotions. However their project has been to understand why a transgression is defined as a transgression by looking in the direction of the moral code as a rational organization of concepts and principles. (Shweder,et. al., 1987).

To conclude these very preliminary considerations pertinent to the cross-cultural conscience (which has threatened to overtake our critical review of

Kohlbergian theory), an evocative word-picture of conscience is offered. A conscience concept, not unlike what the children in the Conscience Study have taught us, calls from across both space and time. It is derived from the classic Chinese philosopher Mencius:

> .... [H]eaven's guidance comes as inborn feelings or inclinations to behavior. These are neither merely inclinations to egoistic preservation nor even a general inclination for altruistic benefit. Heaven's endowment is a fully instinctive morality in seed form. Each of us is born with genetic inclinations to behavior. As we mature these inclinations grow in strength and sensitivity to the moral setting. Barring deprivation or distortion from external influences, they will eventually yield sage-like Confucian moral character. The heart can be thought of as similar to conscience in Western theories except that the moral discrimination capacity postulated by Mencius grows in accuracy throughout life.
>
> The inclinations to behavior make up the xin ('heart-mind')-the ruler of the body.... four seeds or hearts develop into the four primary virtues...the first seed is... sympathy for other humans. That fully developed becomes the virtue of humanity. The second is our penchant to feel shame, which motivates the development of i ('morality'). The third is our disposition to show respect and deference toward social superiors. This motivates conformity to li [previously defined as 'a positive cultural way' or 'conventions']. Finally we have a congenital tendency to discern shi-fei [previously discussed in making a shi ('this:right') or a fei ('this:wrong') assignment]. We distinguish in action and attitude between something approved in the context ...and something not approved. This tendency to have pro-con action guiding attitudes grows into practical wisdom, zhi ('knowledge').... Fully ripened, the heart's organic constitution puts us in harmony with a cosmic moral force-- the flood-like qi ('breath'). We simultaneously use it and are used by it.... [10]

Lastly, on conceptual grounds, Kohlberg has been criticized for excluding "divergent rationalities" in the moral domain. The idea of divergent rationalities is sorted into the following claims: there exists more than one rationally defensible moral code; and, in any moral code with rational appeal, some concepts are mandatory while others are discretionary (both are needed in the code). The mandatory concepts in Kohlbergian theory include the abstract idea of natural law, the abstract principle of harm and the abstract principle of justice. Kohlberg was seen by critics as insisting upon discretionary concepts one or more of which most thinkers in the world are apt to question: a rights-based conception of natural law, natural individualism, his conception of who is a person, what are the 'territories of the self', a conception of justice as equality in which likenesses are emphasized and differences overlooked --in these respects he was very much influenced by (or found common cause with) the moral philosopher John Rawls, a Kantian contractarian. Rawls is noted for his 'original position' and 'the veil of ignorance'.

[Inset 4:

THE VEIL OF IGNORANCE

IMAGINE DECISION-MAKERS ARE SITUATED BEHIND A VEIL OF IGNORANCE. THEY ARE COMPLETELY SELF-INTERESTED. THEY ARE ENTIRELY RATIONAL. THEY HAVE FULL ACCESS TO GENERAL KNOWLEDGE. THEY DO NOT HAVE KNOWLEDGE OF ANYTHING THAT MIGHT MAKE THEM DIFFERENT FROM OTHERS. THEY ARE IGNORANT OF THEIR OWN CLASS, SOCIAL STATUS OR WEALTH; THEY DON'T KNOW THEIR LEVEL OF INTELLIGENCE OR STRENGTH, THEIR AVERSION TO RISK, THEIR OPTIMISM OR PESSIMISM. THEY KNOW NOTHING OF THEIR OWN SOCIETY. THEY DON'T EVEN KNOW THE GENERATION TO WHICH THEY BELONG.

WHAT PRINCIPLES WILL THEY USE FOR DECISION-MAKING?[1]

1. Kidder, R. (1995): How Good People Make Tough Choices. Fireside/ Simon and Schuster; New York. pp. 160-161.

Also see:

Kymlicka, W. (1993): The social contract tradition. In: A Companion to Ethics, P. Singer (ed.) Blackwell Publishers Inc., pp. 191ff.

Rawls, J. (1971): A Theory of Justice.
The Belknap Press of Harvard University Press; Cambridge, Massachucetts.   ]

KOHLBERG IN CONTEXT

Since Kohlberg's stages may be more familiar, it is reasonable to ask : What is the relationship of Kohlbergian stages to our theory of conscience? (See Table I). At first blush, it appears that the Kohlbergian stages (as rendered by Thomas, 1995) are roughly equivalent to the stages we have identified in the conscience domains CONCEPTUALIZATION and MORAL VALUATION (domains which, when taken together, subsume the essential components of moral reasoning or judgment). However, what Table I really represents is a remapping of Kohlbergian stages as if they were not successive stages within the same broadly conceived (cognitive-developmental) domain of moral reasoning or judgement at all. Rather, each Kohlbergian stage is recast as a stage in a domain or combination of domains of conscience development. Begin with Kohlberg's Pre-conventional Stage 1. Lickona (1983) calls it the "unquestioning obedience" stage of moral reasoning, emerging around the time of kindergarten. We discern this stage as having similarities to Conscience Stage I

(EXTERNALIZED, modal age 6 and under) in the domains CONCEPTUALIZATION and AUTHORITY-DERIVED VALUATION. Yet, Kohlberg's Stage 1 also has commonalities with Conscience Stage I in the domain of MORAL EMOTIONAL RESPONSIVENESS in which fear of punishment and enjoyment of reward are among the emotions becoming moralized. There may even be a weak correspondence of Kohlberg Stage 1 and Conscience Stage I in the domain of MORAL VOLITION as well, while there is no particular correspondence with the domain of MORAL ATTACHMENT. It is sufficient to make the point that moral development in the form of moralized attachment is not readily discernible from the perspective of Kohlberg's Stage I.

Kohlberg's Stage 2 (Lickona calls it the " what's--in--it--for--me" stage, arising in early elementary grades) involves a shift of focus to what in Conscience terminology is SELF-DERIVED VALUATION roughly at Conscience Stage II (BRAIN/ HEART, modal age 7-11). In that sub-domain of MORAL VALUATION, the "Stage of Rules," children remain consequence oriented but also encode rules, valuing the rule-making process itself. Lickona calls Kohlberg's Stage 3 the "interpersonal conformity" stage, identifiable in middle to upper elementary grades and early to mid teens. Lickona's description corresponds to Conscience Stage III (PERSONIFIED, modal age 12 to 13) and Conscience Stage IV (CONFUSED, modal age 14 to 15) in the domains MORAL ATTACHMENT and SELF-DERIVED VALUATION. Lickona calls Kohlberg's Stage 4 "responsibility to the system", emergent in high school or late teens. It maps to Conscience Stage V (INTEGRATED, modal age 16 and older) in the domain MORAL VALUATION, AUTHORITY DERIVED, PEER DERIVED, and SELF DERIVED in a triangular balance. Kohlberg's Stage 5 (Lickona calls it "principled conscience", young adulthood) may be mapped on to the domain MORAL VOLITION and Kohlberg's Stage 6 on to the domain PEER DERIVED VALUATION but at Conscience Stages yet to be identified empirically. Something is illuminated by this mapping exercise. In particular, the signals of developmental activity in moral emotion, and moral attachment, are not always captured by Kohlbergian stages. In Kohlbergian Staging operations, signals from

the domain MORAL VOLITION escape detection altogether. So, in Table I, many cells generated by SCI stages and domains are left empty. In effect, by following the moral developmental line discerned exclusively from the cognitive perspective, one is apt to miss the other concurrent, interactive and interdependent developmental lines readily discernible from the standpoint of the stages and domains of conscience formation.

{**Table I.**

KOHLBERG IN CONTEXT

STAGES Lickona's [Kolbergian] Stages	SCI	SCI Domain					
		CON	MER	V2	ATC	V3	VI
MV Stage 0 (preschool) Egocentric	*						
Stafe 1 (KG) Obedience [Punishment and Obedience]	I (6)	X	X				X
Stage 2 (early elementary) "What's In It For Me?" [Individual/Instrumental]	II (7-11)	X		X			
Stage 3 (early to mid teens) Interpersonal Conformity [Mutual Interpersonal Relationships & Conformity]	III (12-13)	X		X	X		
Stage 4 (high school) Responsibility to the System [Social System & /Conscience Maintenance]	IV (14-15)	X				X	
Stage 5 (young adulthood) Principled Conscience [Prior Rights & Social Contract]	V (16+)	X		X		X	X
[Stage 6] [Universal Ethical Principles]							

* Lickona adopted Stage 0 (preschool) from Damon and Selman. The SCI age range was 5-17 years old so there is no isomorphic mapping that can be done on this grid. However, Lickona describes the perception of right as "I should get my own way," which seems to highlight autonomy, and the reasoning as punishment/reward based. At Stage I Lickona describes the perception of right as "I should do as I'm told" and the reasoning as " to stay out of trouble." In essence Lickona has split Kohlberg's first stage, Punishment and Obedience into two: Lickona Stage 0: Punishment and Lickona Stage I: Obedience.   }

(We hope that) in identifying domains of moral development, we are specifying in some detail an important (if not the most important) aspect of human nature. It is in our nature to follow certain discernible patterns of conscience development. As Rest says in introducing his four-component model of moral development (moral sensitivity, moral judgment, moral motivation and moral character), the trick is to show how all these pieces fit together (Rest, 1994).

V. FROM CONSCIENCE DEVELOPMENT TO MORAL PHILOSOPHY.

THE STORY OF GLAUCON'S RINGS

Long before J.R.R. Tolkien wrote about Bilbo and Frodo Baggins and the One Ring, long before Wagner's Siegfried made his Rhine Journey, long before the Nieberlungenliad had become an epic poem, there was an Athenian named Glaucon who challenged another Athenian named Socrates to imagine a ring having the power to invest it's wearer with invisibility, but not only invisibility. Glaucon's ring enabled its wearer to act immorally with no external penalty: to rob, murder or rape without being caught or punished....

As mentioned before, "One may ask 'How much valuational thickness

does the concept of development have?'" Indeed, the philosopher Robert Nozick has argued that degree of organic unity (cf. organismic developmentalist views) seems to be the dimension that best captures our notion of intrinsic value.[11] Descriptors of intrinsic value easily slip into developmentalist language because of developmentalism's philosophical foundations. Such terms introduce a kind of intuitionism (cf. Wilson, 1993) or naturalism into our understanding of conscience.

[Inset 5:

INTUITIONISM

Theories of moral knowledge according to which we have immediate knowledge of the rightness and wrongness of certain actions or the intrinsic goodness of certain kinds of things, states or affairs.[1]

SOME TYPES:

Initially intuitionism was defined in contrast to Mills' utilitarianism and was associated with pluralism, the view that there are a large number of moral principles that cannot be put in any general order of importance in a way that would help resolve conflicts between them. Later intuitionism was associated with the position that concepts about right and wrong are un-analyzable, whether there is more than one principle or not. In subsequent historical developments, even some utilitarians (e.g. Sidgwick) relied upon intuitionism. Intuitionism in the newer sense and pluralism in the older sense were reunited in the work of Ross and Prichard in the 1930s.[2] Ross's ethic of prima facie duties, is pluralistic, deontological and intuitionistic.

 In A THEORY OF JUSTICE, Rawls discounted the sense of intuitionism

as a way of knowing and reverted to identifying it with pluralism. According to Rawls, there are two features to intuitionist theories:

    1) they consist of a plurality of first principles which may conflict.

    2) they include no explicit method, no priority rules, for weighing these principles against one another.[3]

1. A DICTIONARY OF PHILOSOPHY, T. Mautner (ed.)
Blackwell Publishers Inc.; Cambridge, Mass., 1996.
2. Dancy, J. (1993): Intuitionism. In: A COMPANION TO ETHICS,
P. Singer (ed.) Blackwell Publishers Inc., pp.411--420.
3. Rawls, J. (1971): A THEORY OF JUSTICE.
Belknap Press of Harvard University Press; Cambridge, Mass.pp.
34-35.   ]

[Inset 6:

NATURALISM

A cognitivist family of doctrines stating that
* moral judgements are propositions, capable of truth and falsity
*some moral judgments are true
* there are no irreducible moral facts or properties

Some Types:
hedonistic naturalists reduce 'facts' about goodness to facts about pleasure and pain
Aristotelian naturalists prefer 'facts' about human nature and human flourishing, but
preferred 'facts' may be sociological, psychological, scientific,

metaphysical, or theological.

Contemporary example: Mary Midgley ...drawing on ethological literature, she suggests given our natures, there are constraints on the kinds of lives humans will find fulfilling, and hence human action.[1] She cites this passage from Darwin's Descent of Man:

> ...[A]ny animal whatever , endowed with well-marked social instincts, would inevitably acquire a moral sense or conscience, as soon as its intellectual powers had become as well-developed....the social instincts...with the aid of active intellectual powers and the effects of habit, naturally lead to the Golden Rule, "As ye would that men do unto you, do ye to them likewise" and this lies at the foundation of morality.... [2]

1. Pidgen, C.R. (1993) Naturalism. In: P.Singer (ed.) A COMPANION TO ETHICS, Cambridge, Mass: Blackwell Publishers. pp. 421-431.
2. Midgley, M. (1993) The origin of ethics. In: P. Singer (ed.) A COMPANION TO ETHICS Cambridge, Mass: Blackwell Publishers. pp. 3-13.   ]

There may be warrant for this from the standpoint of moral philosophy, but it deserves explication. To establish from a psychobiological standpoint that something is characteristic of human nature, especially something as potential as a capacity or a developmental domain, does not, at least prima facie, provide a compelling argument for valuing it. Some say that it is an aspect of male nature to disseminate genes as widely as possible through sexual activity while it is an aspect of female nature to be as selective as possible when it comes to

mating in order to secure optimum survival conditions for her offspring. That these are aspects of human nature does not indicate their moral value. This distinction is sometimes termed the fact-value or is-ought distinction. Hume wrote:

> In every system of morality, which I have hitherto met with, I have always remark'd, that the author proceeds for some time in the ordinary way of reasoning....makes observations concerning human affairs; when of a sudden I am surpriz'd to find, that instead of the usual copulations of propositions, is and is not, I meet with no proposition that is not connected with an ought or ought not. This change is imperceptible; but is, however, of the last consequence. For as this ought, or ought not, expresses some new relationship or affirmation 'tis necessary that it shou'd be observ'd and explain'd; and at the same time that a reason should be given, for what seems altogether inconceivable, how this new relation can be a deduction from others, which are entirely different from it. But as authors do not commonly use this precaution, I shall presume to recommend it to the readers; and am persuaded, that this small attention wou'd subvert all the vulgar system of morality....[12]

[Inset 7:

NATURALISTIC FALLACY

According to G. E. Moore, the fallacy committed by all ethical naturalists.[1]
Sometimes put in terms of 'Hume's Law': "no 'IS' to 'Ought'" or , positively, as " the autonomy of ethics."

There are three forms of autonomy of ethics:

1) logical autonomy : moral judgments differ fundamentally
   from factual propositions
2) semantic autonomy: moral words don't mean the same as
   other words and cannot be paraphrased in a non-moral idiom
3) ontological autonomy : moral judgments to be true must
   answer to a realm of sui generis ('of its own kind') moral facts
   and properties.

Logical and semantic autonomy are not threats to naturalism. [2]

1. A DICTIONARY OF PHILOSOPHY, T. Mautner (ed.)
   Blackwell Publishers Inc.; Cambridge, Mass.,1996.
2. Pidgen, C.R. (1993) Naturalism. In: P. Singer (ed.)
   A COMPANION TO ETHICS, Cambridge, Mass:
   Blackwell Publishers. pp. 421-431.

]

On what grounds do domains of conscience take pride of place among aspects of our nature such that we are compelled to value them any more than other natural tendencies? Nozick argues the matter this way:

Suppose a contest were being held to design a valuable or precious being. A prize is to be given simply for succeeding; the winner does not have to justify the application of the terms "valuable" or "precious." If you participated in this contest, which characteristics would you give your entry? Consider the different characteristics and ask (holding everything else constant) whether a being would be more valuable and precious if it

had that characteristic or not.

Nozick's proposed valuable characteristics are:

free will

conscious [-ness]

self-conscious [-ness]

able to do something because its right

able to recognize value

able to guide behavior in accord with its recognition of value

self-choosing[13]

These can be condensed into"...a value seeking self... [which has some significant degree of organic unity and hence of intrinsic value] in virtue of that (double) characteristic..." [14]

CONSCIENCE AS BRIDGE BETWEEN FACT AND VALUE

Modern evolutionary sociobiology has provided an important corrective to how we understand human motivational psychology--we are not, after all, motivated only by libido and aggression. Altruism is also motivational and also deeply ingrained (Ruse, 1993). Even with this corrective, we are left with the fairly commonplace idea that vice and virtue both reside in our nature while the knowledge of what constitutes vice and what constitutes virtue may not.

The questions " What is nature vs. nurture?" has been supplanted by the dual questions " What in our nurture becomes our nature?" and "What in our nature ought to be nurtured?" Moral developmental psychology alone is (and should be?) mute on this subject. However, we are at least tempted to say that the perspective of moral developmental psychology does seem to point beyond itself to a version of naturalism, allowing for the existence of diverse trajectories within each domain of conscience development. Such a version of naturalism

would be compatible with some forms of both utilitarian and deontological, as well as, virtue ethics but would not support the hegemony of any of these moral traditions {Consider also the tradition of prima facie duties--Ross}.

Beginning with conscience functioning (as distinct from development), on the other hand, seems at first to circumvent the difficulties with value laden developmental terminology. We can proceed to the domains of conscience without really answering the moral philosophical question" Should one value each domain of conscience as much as every other (or, should one value any at all)?" Instead, a hypothetical condition is identified which precedes the question posed: "If the domains of conscience are themselves subject to a reflective, self-subsuming valuational process, then what values and virtues are seen to arise in association with each domain?" The bedrock values arise only by valuing the conscience domains specified within the context of practicing the virtues associated with those same domains in a life lived in accordance with behavioral imperatives shaped and fitted to the virtues. Naturalistic fallacy (if it is a fallacy) may be averted. However there remains another difficulty: a pluralism of moral principles or prima facie duties.

{Table II.

Salient Domain Conscience Functioning	Bedrock Value
Ground: Moral Aporia	Engagement
Conceptualization	Meaning
Moral Attachment	Connectedness

Moral Emotional	Harmony
Responsiveness	Balance
Moral Volition	Autonomy
Moral Valuation	Worth
i) authority-derived	Continuity
	Tradition
ii) self-derived	Authenticity
iii) peer/progeny	Justice
derived	**}**

Does developmental psychology provide the means of resolving the pluralism in a way that functional psychology does not? That is, does a particular bedrock value become deeper, richer and more complex in the developmental process owing to how the domains of conscience and the bedrock values associated with them are yoked together?

It may be the case (susceptible of empirical validation?) that an individual's progression in development in one conscience domain proceeds in concert with his/her progression in other domains, although his/her status in each domain may not begin or always remain evenly at the same level. Hence a domain may be, for some time, salient in the developmental process, and account for differences in conscience style, more or less suiting the different moral philosophies.[15] Alternatively, by adapting a term applied by Nozick to values, we may speak of the uniquely individual contours of conscience. In the figure below, the density of color relates to the consolidation of development in a particular domain while the upper boundary identifies the salient of development according to stages.

{Table III   Conscience Contours

SCI Domains

		CON	MER	V2	ATC	V1	MV	V3
	( )							
	V							x
		x				x		
					x		x	
SCI STAGES	IV		x	x				
	III							
	II							
	I							

Figurative representation of a person who esteems reflectiveness, tradition and regard for others by practicing virtues of honesty in self examination, respect for authority in his/her chosen and assigned roles and fairness towards others but who has not as fully cultivated virtues corresponding to the values of balance and freedom and connectedness.   **}**

In any event as the domains of moral development are explicated and empirically validated in normal and adverse circumstances, it becomes possible to see their connections to different moral philosophies that have come to dominate moral reasoning and discourse. We have today refinements of deontological, consequential (e.g.utilitarian), rights-based, entitlements-based and virtues-based ethics vying with egoism for pride of place in our ethical considerations {-if not our moral philosophies (for an examination of morality and moral philosophy vs. ethical considerations see Williams, 1985)}.

[Inset 8:   DEONTOLOGY

Moral theories according to which the rightness or
obligatori-ness of an action is not exclusively determined
by the value of its consequences.[1]

" The end does not justify the means," is a
deontological expression.

Some acts are right or wrong in themselves.
To act rightly, agents must first of all refrain from
doing things that are known to be, before
the fact, wrong. The particular requirements
are called, variously:
> * rules
> * laws
> * deontological constraints
> * prohibitions
> * limitations
> * proscriptions
> * norms

Deontological constraints are

        1) negatively formulated as " Thou shalt not's"

        2) narrowly framed and bounded

        3) narrowly directed, attaching to agent's

decisions and actions rather than the

consequences of their choice or action [2]

        1. A DICTIONARY OF PHILOSOPHY, T. Mautner (ed.)

          Blackwell Publishers Inc.; Cambridge, Mass.,1996.

        2. Davis, N. (1993): Contemporary deontology. In:

          A COMPANION TO ETHICS, P. Singer (ed.)

          Blackwell Publishers Inc., pp. 205--218.

Also see:

Rawls, J. (1971): A THEORY OF JUSTICE.

The Belknap Press of Harvard University Press;

Cambridge, Massachucetts.   **]**

[Inset 9:   **CONSEQUENTIALISM**

      (OLDER TERM: TELEOLOGY)

The view that whatever values an individual or

institutional agent adopts, the proper response to

those values is to promote them.[1]

Consequences alone should be taken into account

when making judgments about right and wrong. [2]

Some Types:

Some identify utilitarianism with consequentialism;
some say it is a kind of consequentialism; some say
the term 'utilitarianism' should be reserved for
consequentialism with the assumption that only
pleasure (alternatively: well-being or preference
satisfaction) has intrinsic value. Some advise
that the distinctions should be 'utilitarian vs .
non-utilitarian' and 'consequentialist vs.
nonconsequentialist.'[3]

Hence deontology is nonconsequentialist,
virtue-based ethics are consequentialist
(invoke teleology) but may or may not have a utilitarian
component.

1. Pettit, P. (1993): Consequentialism. In: A COMPANION
    TO ETHICS, P. Singer (ed.) Blackwell Publishers Inc.,
    pp.230-240.
2,3. A DICTIONARY OF PHILOSOPHY, T. Mautner (ed.)
    Blackwell Publishers Inc.; Cambridge, Mass., 1996.

]

`   **[Inset 10:   VIRTUE ETHICS**

Ethical theory in which the concept of virtue is fundamental,
in contrast to rule- or duty- based moral theories.[1]

Also uses terms such as 'integrity' or 'character'. What does

a good person do in real life situations?

The Virtue-theorist does not necessarily reject utilitarianism
or rights-based theories, but believes these theories ignore
ordinary moral life involving character. [2]

SOME TYPES:

Medicine has a moral tradition in which physicians' lives
can achieve a certain unity or 'narrative'. They can look
backwards (and forward) and see how their lives made
(make) a difference. Moreover, medicine has its internal
'practices' which allow for intrinsic pleasure
beyond its extrinsic rewards: the deft surgical hand,
the perspicacious diagnosis, the esteem of a great
teacher by students....[3]

Contemporary representatives: Elizabeth Anscombe,
Alasdair MacIntyre, Phillipa Foot.

1. A DICTIONARY OF PHILOSOPHY, T. Mautner (ed.)
    Blackwell Publishers Inc.; Cambridge, Mass.,1996.
2,3. Pence, G. (1993): Virtue Theory.In:
    A COMPANION TO ETHICS, P. Singer (ed.)
    Blackwell Publishers Inc., pp. 249-258.
Also see:
MacIntyre, A. (1984): AFTER VIRTUE, second edition.
University of Notre Dame Press, Notre Dame, Indiana.   ]

The correlation of bedrock values with salient domains of conscience
affords a new perspective on and new insight into the developmental
psychological origins of the great moral philosophies. Table IV was derived

intuitively and is proposed tentatively in recognition that the moral philosophies, having been shaped by human beings, are subject to the influences of their individual, developmental trajectories in the domains of moral psychology.

{Table IV   Conscience Domains, Intrinsic Values &
Moral Philosophical Traditions

Salient Domain Conscience Functioning	Bedrock Value	Moral Philosophies (historical precursors)
Ground: Moral Aporia	Engagement	*
Conceptualization	Meaning	Socratism, Platonism, Stoicism
Moral Attachment	Connectedness	Communitarian
Moral Emotional Responsiveness	Harmony Balance	Virtue-based Ethics (Nicomachean Ethics) Care-based ethics
Moral Volition	Individuality	Libertarianism Existentialism
Moral Valuation	Worth	Teleology or Consequentialism
i) authority-derived	Continuity Tradition	Authoritarianism Covenatal ethics
ii) self-derived	Authenticity	Egoist ethics Enlightened Self-Interest
iii) peer/progeny derived	Justice	Contractarian Ethics **}**

The in-depth critique of any particular representative of a philosophical tradition would proceed with an appreciation that much more complexity is involved. For example, in associating an Aristotelian virtue based ethics with the bedrock value of Harmony or Balance, originally associated with the domain of moral emotional responsiveness, other rough correspondences among the domains of conscience and this moral philosophy should not be ignored.17

As a search of the index to various histories of philosophy (Coppleston, eight volumes published between 1946-1974 new edition 1993; Jones, five volumes published between 1952-1980) will convince the reader, in spite of various emphases on the Good, Well-being and Virtue, conscience as a core concept (or even as an auxiliary concept worthy of explication) seldom appears in anyone's philosophy, at least by the name of conscience. Exceptions include Ockham who uses the word 'conscience' in connection with the Scholastic concept of 'right reason' (in turn, derived from Aristotle's Nicomachean Ethics) and espouses the doctrine that one is morally obliged to follow one's conscience even if it is "invincibly erroneous" (Coppleston, 1993). In the seventeenth and eighteenth centuries, conscience is given much more consideration in the form of moral sense beginning with The Earl of Shaftesbury and continuing with Hucheson, Bishop Butler, Hume and Adam Smith. In the latter there emerges an emphasis upon sympathy, what today would be called empathy.18 In Smith there is a singular emphasis upon this moral emotion (sentiment).

The libertarian view represented by Nozick (1981) envisions the tasks of ethical theory to demarcate both moral push and pull. Ethical theory must show and explain why and how the value of a person gives rise to determinate conditions, to moral constraints upon the behavior of others; ethical theory must also show and explain why and how a person whose life befits his own value will (thereby) be led to behave toward others in specified ways, why and how a person is better off behaving morally towards others--in accordance with their moral pull.... [19] As in previous cases, rough correspondences may be drawn between each conscience domain and various elements of Nozick's theory of value. However, what appears to us salient in that theory are the bedrock values

of FREEDOM, MEANING and VALUE, itself, associated respectively with the conscience domains of moral volition, conceptualization, and valuation.

Similarly, a complete moral developmental critique of the early existentialist writings on ethics of Kierkegaard and Nietzsche would seek to identify how development in each conscience domain is represented in the corpus of his philosophy even if the bedrock values associated with some domain(s), again volition and valuation but notably not conceptualization, are emphasized at the expense of the others. Kierkegaard emphasizes radical individuality (although he allows that each individual is both personal self and the human race (self derived valuation is also salient in Kierkegaard/Climacus' first dialectical movement that subjectivity (inwardness) is the truth. However, Kierkegaard's work with respect to conscience, probably has most contributory value in his critique of Hegel's teaching on the same subject and most originative value in his exegetical account of Abraham and Isaac and the concept of the teleological suspension of the ethical).

Nietzsche, however, presents a radically different volitional/valuational alternative to choosing conscience (which he repudiates): [20]

[Inset 11: NIETSZCHE'S PICTURE OF CONSCIENCE

I take bad conscience to be a deep seated malady to which man succumbed under the pressure of the most profound transformation he ever underwent--the one that made him once and for all a sociable and pacific creature.... All instincts that are not allowed freeplay turn inward. This is what I call man's interiorization; it alone provides the soil for the growth of what is later called man's soul.... The formidable bulwarks by means of which the polity protected itself against the ancient instincts of freedom...caused those wild, extravagant instincts to turn in upon man. Hostility, cruelty, the delight in persecution, raids, excitement, destruction, all turned against their begetter.... Man, with his need for self-torture, his sublimated cruelty resulting from the cooping-up of his animal nature

within a polity, invented bad conscience in order to hurt himself, after the blocking of the more natural outlet of his cruelty.

Friedrich Nietzsche,
from THE GENEALOGY OF MORALS   ]

In the Table V, we have identified associated virtues. The relationship of value to virtue requires some clarification. According to MacIntyre (1984): as a first stage in definition

> A virtue is an acquired human quality the possession
> and exercise of which tends to enable us to achieve those
> goods which are internal to practices and the lack of which
> effectively prevents us from achieving any such goods.[21]

PRACTICE had previously been defined as

> ...any coherent and complex form of socially established
> cooperative human activity through which goods internal to
> that form of activity are realized in the course of trying to
> achieve those standards of excellence which are appropriate
> to, and partially definitive of, that form of activity, with the
> result that human powers to achieve excellence and human
> conceptions of the ends and goods involved are systematically
> extended... [22]

EXTERNAL GOODS have the characteristics

> ...that when achieved they are always some individual's
> property and possession... [and] that the more someone has of

them, the less there is for other people.....[23]

INTERNAL GOODS are

> ...good for the whole community who participate in
> the practice... [24]

On MacIntyre's view, virtues are to be found in the context of practices which occur in the unity of life and tradition:

The unity of a human life is the unity of a narrative quest...which is always an education both as to the character of what is sought and in self knowledge. The virtues are therefore to be understood as those dispositions which not only sustain practices and enable us to achieve the goods internal to practices, but which will also sustain us in the relevant kind of quest for the good, by enabling us to overcome the harms, dangers, temptations and distractions which we encounter, and which will furnish us with increasing self-knowledge and increasing of the good.... [25]

{Table V   Conscience Domains, Intrinsic Values, Associated Virtues & Moral Philosophical Traditions

Salient Conscience Domain	Bedrock Value	Associated Virtues	Moral Philosophy (historical precursors)
Ground : Moral Aporia	Engagement	capacity for wonder piety humility	pre-philosophical
Conceptualization	Meaning	inquisitiveness Truth	Socratism, Platonism, Stoicism
Moral Attachment	Connectedness	loyalty mutuality tolerance	Communitarian

Moral Emotional Responsiveness	Harmony Individuality	moderaton empathy compassion	Virtue-based Ethics (Nicomachean Ethics) Care-based ethics
Moral Volition	Individuality	respect for freedom creativity	Libertarianism Existentialism
Moral Valuation	Worth	purposive direction Virtue	Teleology or Consequentialism
i) authority derived	Continuity Tradition	respect for authority	Authoritarianism Covenental Ethics
ii) self derived	Authenticity	self respect inwardness	Egoistic Ethics Enlightened Self-Interest
iii) peer/progeny derived	Justice	impartiality	Contractarian Ethics }

The completed table also exposes the developmental roots, in the domains of conscience, of moral (right v right) dilemmas recently identified in dichotomous fashion by Kidder(1995):

[Inset 12:   **KIDDER'S MORAL DILEMMAS**

TRUTH VS. LOYALTY
INDIVIDUAL VS. COMMUNITY
SHORT TERM VS. LONGTERM
JUSTICE VS. MERCY

Kidder, R. (1995): HOW GOOD PEOPLE
MAKE TOUGH CHOICES.
Fireside/ Simon and Schuster; New York.   ]

However, it is also apparent from Table V that dichotomous treatment of moral issues does not do justice to the moral aporia with which human beings must

contend and the moral adventure upon which they may embark. In fact there are not simply di- but also tri- and quadri- (and even more) lemmas to recognize. That is, any of the bedrock values may be emphasized to the apparent detriment of not just one but any and all of the others and subserve a person's being, in a specifiable way, "virtuous to a fault."

A CONSCIENCE CENTERED THEORY OF (MEDICAL) ETHICS

While still evolving, our conscience-centered theory of ethics begins with the following propositions:

1. Valuation exists.
2. Valuation has intrinsic value.
3. Valuation does not exist without attachment, cognition, emotion and volition, hence these too, must have at least instrumental (more probably intrinsic and, possibly in the case of volition, originative) value.
4. Conscience formation is one means by which an organic unity of these developmental domains is attained, in virtue of which they are said to be moralized.
5. Choosing a life with conscience has intrinsic (originative?) value in virtue of which each of the other domains has intrinsic (bedrock) value. Hence the choice of conscience involves accepting certain values which govern, but in turn are shaped by, the practice of virtues.
6. These values are: meaning, connectedness, harmony, autonomy, and goodness.26

To say so much is to accept that the term naturalistic can be applied to our conscience-centered theory of ethics, but only if the bridge of conscience is chosen as a construct between fact and value. A conscience-centered theory of

ethics can be counted among the pluralistic ethics. It imposes some constraints on relativism but does not (and does not seek to) eliminate it. We would agree with David Wong in his assessment:

> ... if human nature has a definite structure, one would expect further constraining conditions on an adequate morality to derive from our nature. But the complexity of our nature makes it possible for us to prize a variety of goods and to order them in different ways, and this opens the way for a substantial relativism to be true.... Wong, 1993)

Moral adventure requires taking risks by adopting perspectives without unnecessary exclusiveness. It requires openness to moral discourse; but it does not require losing oneself in the process. An individual adopting a conscience centered ethic, will understand that virtuous practice is always in one's own socio-cultural and temporal context but that the context changes and can be changed through, among other things, advocacy perhaps stimulated by cross cultural contact bridging space or historical understanding bridging time (see Williams, 1985 also cited in endnote #18). Fostering optimal development of conceptualization of conscience, moral attachment, moral emotional responsiveness, moral valuation and moral volition in oneself and others is the moral adventure in terms of developmental domains. Balancing connectedness, individuality, continuity, authenticity and the Golden Rule is the moral adventure in terms of bedrock values. Freedom, tolerance, respect for and duty towards authority, self and others must be justly and compassionately moderated. That is the moral adventure in terms of virtues. The integration of moral philosophical principles and methods of discourse with moral imagination (cf. Johnson, 1993) is the moral adventure in philosophical terms. [27]

If we choose to nurture and protect that part of our nature we call conscience, then there are boundary conditions we accept, in virtue of our choice, determining which and, also, how bridges will be constructed over the gap between fact and value. These conditions specify a limited plurality of

intrinsic values, one associated with each domain of conscience. Corresponding to the plurality of values there is a somewhat less limited plurality of prima facie duties and virtues, the unity or reconciliation of which (or, alternatively, the holding of both in creative tension) is an open question for each person until his/her life story is finally told.

V. FROM MORAL PHILOSOPHY TO MEDICAL ETHICS.

The moral philosophies are acknowledged for their powerful influence in shaping Medical Ethics (Pellegrino, 1993):

Current proposals for moral legitimation- such as physician-assisted suicide, voluntary and even involuntary euthanasia, health care rationing, the buying and selling of organs for transplantation, or the renting of uterus, ova, and sperm- each has a rationalization deeply rooted in some conceptual shift in moral theory....

It is possible to explore and critique a medical ethical argument or proposal from a developmental psychological point of view, albeit indirectly, through such a critique of the moral theory in which it is rooted, or with the fundamental values and virtues associated with the moral theory.

How do those principles that have been hitherto identified with medical ethics (Pellegrino, 1993)-

BENEFICENCE,
NONMALEFICENCE,
AUTONOMY and
JUSTICE

- relate to the conscience domains? AUTONOMY is a medical ethical principle having to do with respecting the patient's choices, justice with uneven distribution

of health care. Autonomy appears connected with the domain of MORAL VOLITION; JUSTICE with the domain of VALUATION. But what of BENEFICENCE (intend good) and NON-MALEFICENCE (do no harm)? These seem overarching, requiring evenly hovering attention to each and every bedrock value of conscience. And yet there may be even more involved in accepting the role of healer. Are there healing values and virtues that are articulated from each bedrock value of conscience linked to each moral developmental domain as well as those that have been hitherto identified with medical ethics? ADVANCING KNOWLEDGE, in oneself and in one's patient, seems to be a principle derived from the bedrock value associated with the Conscience domain of CONCEPTUALIZATION. Adherence to this principle empowers both health care provider and patient to share decision-making. Psycho-educational interventions and the process of informed consent as well as continuing medical education might be governed by this principle.

STRENGTHENING CONNECTIONS within the various communities in which the patient lives and upon which he/she depends: familial and extra-familial- particularly the medical community (including medical care case managers), seems to correspond to Moral Attachment. Accepting and seeking supervision, patient care monitoring, curbside and more formal second opinions, interdisciplinary treatment planning and networking among service providers as well as collateral contacts with family members and referrals to support groups might be governed by this principle.

Cultivation of professional MORAL EMOTIONAL RESPONSIVENESS: interest in patients, empathic responsiveness to them, adaptive handling of disgust, anger, fear as well as professional pride and guilt, are examples.

While AUTONOMY is readily identified with MORAL VOLITION, MORAL VOLITION is an overarching domain in which development proceeds from the stage of autonomy to industry, efficacy, agency and finally advocacy. As a principle, MORAL VOLITION seems to govern both the health care provider and the patient. Are expectations of the health care provider appropriate? To what extent does Aesculapian or, simply, sapiential authority, undeniably diminished in

our era, deserve respect as a potential source of AUTHORITY-DERIVED VALUATION? When such authority is invoked, is there appropriate circumspection regarding its limitations? Is such authority recognized as the basis for setting limits to what the health care provider can do or should be asked to do either by the patient or by third party payors through managed care?

The patient's responsibility for him/herself (dovetailing with the domain of SELF-DERIVED VALUATION) is the other side of his/her freedom. Perhaps the health care provider's role is governed by the principle of beneficence when the patient's healing is seen in the overall context of the person's flourishing, and by the principle of non-malificence when flourishing is not threatened by either the effort to heal or the limits placed upon the mode of healing by the autonomous functioning of the patient or the agent of managed care.

The health care providers willingness to participate in health care reform is governed by JUSTICE and strongly related to PEER/PROGENY-DERIVED VALUATION. In justice we see the melding of advocacy, as the terminus of the developmental trajectory from autonomy, and peer derived valuation.

VI. THE HEALTH PROFESSIONAL'S CONSCIENCE.

In summary, by examining the roots of medical ethics in moral development indirectly via moral theory or directly via bedrock values associated with conscience domains, in addition to beneficence, non-maleficence, autonomy and justice, we can provisionally expand the list of principles for medical ethics to include advancing knowledge, strengthening connections, and cultivating moral emotional responsiveness. It remains to be seen (do we undertake this research?) [28] whether and how these particular values acquire any sort of strength in the course of professional education and to what extent they are accompanied by changes in their associated conscience domains. Does it even make sense to speak of a professional conscience as something derived but distinct from conscience as we have identified it? Is the health professional's conscience simply a conscience that has assimilated the health profession's

standards and ethic, based upon biomedical principlism as an iterative process in the domain of moral authority derived valuation? Or does each conscience domain undergo transformation such that it becomes distinctly professional? While Dr. Every Person lets her conscience be her guide as she practices her chosen profession, does she--and how does she--also guide her conscience according to that profession and advocate for changes in the institutions that bear it?

AN ETHICAL CONSIDERATION
FOR THOSE IN THE HEALING PROFESSIONS

ACT (TREAT, TEACH, STUDY AND LEARN)
IN SUCH A WAY THAT
NURTURES AND PROTECTS CONSCIENCE
IN ONESELF AND OTHERS.

Endnotes

1. Aesthetic, moral, and religious development are proper subjects for psychological study so long as the science involved is not confounded with either the investigators' aesthetic ideal(s), moral philosophy(ies), or religious persuasion(s). With regard to the study of conscience development and functioning, we do not presume to argue from observations, analyses and interpretations of data (i.e. from what appears to be the case) to what ought to be. In philosophy, such arguments are considered flawed, subject as they are to what is termed the naturalistic fallacy. The study of human sexuality does not in itself tell us how to value human sexuality. Analogously, neither does the study of human conscience tell us how to value human conscience. Yet each of the investigators, each of the subjects, and each of the subjects' parents in the Stilwell Conscience Study considered it valuable enough to participate. So we who have participated in the scientific study of conscience are not dirempt of

values either at the front end in choosing to participate in the study or at the back end in choosing how to use the results. Like it or not, in between the front end and the back end, values were ever operating as we chose what to pay attention to the most and how we framed the experience of our data.

Turnabout is fair play. Having said that moral and religious development are proper subjects for psychological study, it is incumbent upon us to note that the psychological understanding of moral or religious development may properly be viewed in both the context of moral philosophy and religion.

This fundamental point is not just applicable to research. Those of us who conduct therapy recognize that while we may strive to be "nonjudgmental" in our approach to patients, the very act of adopting a nonjudgmental attitude is the outcome of a judgment made on the basis of a healing value. The therapist trusts in the processes of growth and development; when those processes are impaired, in healing; and as those processes resume, in the prospect of human flourishing. Moreover, the therapist who is governed by healing values is curious about all that is encompassed by the human experience: aesthetic, moral, and religious no less than psychosexual development. We do not escape, indeed we embrace, values in therapy which, for example help a person reframe experiences (i.e. explore how she can value differently, or find a different moral in her story) in such a way that provides more meaning and supports more adaptive functioning. To be sure, healing values are even present in making a biological intervention. The expectation that medication will confer benefit without unacceptable side effects is a value shaped expectation in ongoing pharmacotherapy. This is particularly true when the therapeutic effect and the side effect are as subtly different but as closely linked as two sides to the same coin: " Doctor, the Prozac really has helped my depression but I don't like the way it dampens some of my emotional responses."

2. Jones, W.T. (1980) A HISTORY OF WESTERN PHILOSOPHY IV: KANT AND THE NINETEENTH CENTURY, second edition, revised. Harcourt Brace

Jovanovich College Publishers, Ft Worth. pp. 14-15.

3. Ibid., introduction xx.

4. Ibid., pp. 20-21.

5. Ibid., pp. 65-68. Kant drew a distinction between what is within and what is beyond the spatiotemporal manifold, as opposed to drawing a distinction along substantival lines such as Descartes had done. This allowed him to consider the (noumenal) self beyond knowledge which is limited to what is within the spatiotemporal world, and allowed for the possibility of agency, inter alia, as regulative of empirical inquiry. Also see pp.107-108: Jones points out that much of subsequent philosophy has followed one or another pathway out of the Kantian paradigm with respect to theories of knowledge, some denying the existence of noumena, altogether, others opposing Kant's view that the mind has no access to noumena either by reason (e.g. Hegel's dialectic) or intuitively (e.g. Schopenauer).

6. Kant, I. translated by H.J. Paton (1964): GROUNDWORK OF THE METAPHYSIC OF MORALS, Harper and Row, New York, p.96.

7. Elkind, D. (1980) Developmental Structuralism of Jean Piaget. In: THE COMPREHENSIVE TEXTBOOK OF PSYCHIATRY III (H. Kaplan, A. Freedman & B. Sadock, eds). Williams and Wilkins, Baltimore, p. 374:

> In his CRITIQUE OF PURE REASON, Kant argued that reason is not pure because it requires experience but always categorizes it, so one can never know it in the raw. Thus Kant saw that all human knowledge bears the imprint of human knowing. But the imprint that Kant perceived was dictated by the physics and mathematics of his time. He mistook some of what was known for categories of knowing. He had no method, other than

reflection, for separating the knowing process from the content known. Piaget, by creating ...an experimental epistemology... was able to arrive at an empirical separation between the processes of knowing and the content known.... He was able to separate out what was contributed by the child from what was contributed by experience in a more exact way than Kant was able to.... Structuralism ...permits new reorganizations and new knowledge and is, therefore more flexible and open than the Kantian categories....

8. For an overview of these issues see: Overton, W. & Horowitz, H. (1991): Developmental psychopathology: integrations and differentiations. In: ROCHESTER SYMPOSIUM ON DEVELOPMENTAL PSYCHOPATHOLOGY-MODELS OF INTEGRATION (ed. D. Cicchetti & S. Toth), University of Rochester Press. pp. 1-42. The following precis is offered:

Levels of knowing are identified first: these are theory, metatheory, empirical scientific demarcationist strategies and epistemology. Stations of knowing are dealt with in an historic context. There are the realist-objectivist stations, the first of which claims that knowledge is independent of the knower with the associated demarcationist strategy being called positivism - to be scientific any explanatory statement must be an empirical generalization induced directly from observation, and demonstrably capable of being directly reducible to observation. A second station is historical realism which is more of a convergence theory of knowing, accepting that observation is clouded by illusion, rumor and prejudice, but claiming that the tools of logic and passage of time will allow reality and illusion to be sorted out. There are rationalist stations, which reject realism in favor of understanding that all human knowledge derives from the activity of interpretation. This leads to a cycle of choices between skepticism (complete uncertainty of all knowledge) and dogmatism (marked by the belief that there must be some omniscient source of truth

outside human interpretation). Associated with this station is the strategy attributed to Norwood Hanson: all data is thought of as "theory laden", science involves discerning patterns rather than observing cause-effect sequences. Such things as mental structures, schemata, ego and dynamisms could be treated as legitimate scientific explanation. Kuhn's famous treatise on the Structure of Scientific Revolutions is cited as an elaboration of this station. The post skeptical rationalist station shares with other stations of science the aim of discovering a coherent system of understanding that will introduce an order and organization into the world, and this is brought about by explanation which moves from the manifest man-in-the-world to the scientific man-in-the-world, from the prevalent folk psychology to critical formal psychology. What is different at this station is a rejection of complete reliance upon reductionistic explanation. Rather, order is brought into the manifest world by constructing abstract, normative patterns that plausibly, intelligibly and coherently systematize the domain of inquiry. These patterns originate in abductive or retroductive inference processes, which originate in metaphor and metatheoretical assumptions. Causal laws, or general antecedent-consequent functional relations become formulated within, and derive their meaning from, the pattern context. Testing proceeds according to criteria including scope of application, depth, logical consistency, fruitfulness, viability and empirical support. Absolute fixed knowledge is not possible but coherent, relatively stable, broadly applicable knowledge is a warranted and attainable goal. Demanded is a delicate balance and dialectical tension between the conceptual and empirical, interpretation and observation, theory and research method. Bowlby and attachment theorists/researchers are offered as the best contemporary examples.

For an earlier account of the conflict among --what are termed above as-- metatheoretical and demarcationist strategies and its effect on psychology, see J. Rychlak (1988): THE PSYCHOLOGY OF RADICAL HUMANISM.

9. While our remark about Piaget anticipating game theory is somewhat facetious, there is an interesting relationship between morality and game theory described in the moral philosophical literature. See, for example, MacIntyre, A. AFTER VIRTUE second edition, University of Notre Dame Press, Notre Dame, Indiana, p. 97ff: The author has been discussing the character of generalizations in social science and their lack of predictive power and sources of unpredictability in human affairs:

>...to some theorists in political science the formal structures of game theory have served to provide a possible basis for explanatory and predictive theory incorporating law like generalizations. Take the formal structure of an n-person game, identify the relevant interests of the players in some empirical situation and we shall at the very least be able to predict what alliances and coalitions a fully rational player will enter into and ...the pressures upon and the subsequent behavior of not fully rational players.... Consider three types of obstacle to the transfer of the formal structure of game theory to actual social and political situations. The first concerns the indefinite reflexivity of game theoretic situations. I am trying to predict what move you will make; in order to predict this I must predict what you will predict as to what move I will make.... and so on. At each stage each of us will simultaneously be trying to render himself, or herself, unpredictable by the other; and each of us will also be relying on the knowledge that the other will be trying to make himself or herself unpredictable in forming his or her predictions.... [A second obstacle is that] game theoretic situations are characteristically situations of imperfect knowledge... it is a major interest of each actor to maximize the imperfection of the information of certain other actors at the same time as he improves his own.... [The third obstacle is that] in any given social interaction it is frequently the case that many different transactions are taking place at one and the same time between members of the same

group. Not one game is being played, but several, and if the game metaphor may be stretched further, the problem about real life is that moving one's knight to QB3 may always be replied to with a lob across the net.

MacIntyre., p104, subsequently writes :

> Each of us, individually and as a member of particular social groups, seeks to embody his own plans and projects in the natural and social world. A condition of achieving this is to render as much as possible of both natural and social environment as possible predictable and the importance of both natural and social science in our lives derives at least in part -although only in part- from their contribution to this project. At the same time each of us, individually and as a member of particular social groups, aspires to preserve his independence, his freedom, his creativity, and that inner reflection which plays so great a part in freedom and creativity, from invasion by others.... We need to remain to some degree opaque and unpredictable, particularly when threatened by the predictive practices of others....

In contrast see: Nozick,R.(1981): PHILOSOPHICAL EXPLANATIONS, The Belknap Press of Harvard University Press, Cambridge, Mass. p.577 ff. regarding a meaningful life as one lived transparently.

10. Hansen, C. (1993): Classical Chinese ethics. In: A COMPANION TO ETHICS (ed. P. Singer). Blackwell Publishers Ltd., Oxford, UK. pp. 74-75.
    For an excellent comparison and contrast of Western and early Buddhist moral philosophical traditions see: Kalupahana, D.J. (1995): ETHICS IN EARLY BUDDHISM. University of Hawaii Press, Honolulu.

11. Nozick, pp. 418-422.

12. Hume, D. TREATISE ON HUMAN NATURE, BOOK III,Part I, Sec. I. cited in Nozick, pp.399-400n.

For basic orientation to the naturalistic fallacy and naturalism see: Pigden.C (1993): Naturalism. In: P. Singer, pp.421-431.

For other commentaries on the subject, see: Williams, B. (1985): ETHICS AND THE LIMITS OF PHILOSOPHY. Harvard University Press, Cambridge, Mass, pp.128-131, and the following chapter.

> There are genuine ethical, and ultimately metaphysical, concerns underlying the worries about ought and is and the naturalistic fallacy. At the heart of them is an idea that our values are not "in the world", that a properly untendentious description of the world would not mention any values, that our values are in some sense imposed or projected on our surroundings...

> If there is some fundamental distinction of fact and value, it is certainly not a universal feat of humanity to have recognized it--it is instead a discovery, an achievement of enlightenment. But then there is no reason to suppose that our ethical language, insofar as there is any such well-defined thing, already presents the distinction to us. It may be that it does not present anything of the sort, either suggestive of such a distinction or concealing it: it may be a mistake to think that language can embody distinctively metaphysical beliefs...

> [T]hicker or more specific ethical notions such as treachery and promise and brutality and courage seem to express a union of fact and value...The way these notions are applied is determined by what the world is like... their application usually involves a certain valuation of the situation, of persons or actions...Terms of this kind certainly do not lay bare the fact-value distinction. Rather the theorist who wants to defend the distinction has to interpret the workings of these terms, and he does so by treating

them as a conjunction of a factual and an evaluative element...

These threads are taken up again on p. 141:

> Prescriptivism claims that what governs the application of a concept to the world is the descriptive element and...the evaluative element plays no part...
> Against this...there is no reason to believe that a descriptive equivalent will necessarily be available. How we "go on" from one application to another is a function of the kind of interest that the concept represents, and we should not assume that we could see how people " go on" if we did not share the evaluative perspective in which this kind of concept has its point.

After consideration and rejection of objectivist strategies that attempt via reflection to substitute knowledge for beliefs attained in unreflective practice, Williams turns his attention to the project of giving ethical life an objective and determinate grounding in considerations about human nature, representing the only intelligible form of ethical objectivity at the reflective level (p.152-153). His comments here are especially pertinent to our association of intrinsic, or bedrock, values with the conscience domains, particularly if these are seen as derived from those domains by a reflective, self-subsuming process of valuation.

> If the project succeeded, it would not simply be a matter of agreement on a theory of human nature. The convergence itself would be partly in social and psychological science, but what would matter would be a convergence to which scientific conclusions provided only part of the means. Nor, on the other hand, would there be a convergence directly on ethical truths, as in the other objectivist model. One ethical belief might be said to be in its own right an object of knowledge at the reflective level, to the effect that a certain kind of life was best for human beings. But this will not yield other ethical truths directly. The reason, to put it summarily, is

that excellence or satisfactoriness of a life does not stand to beliefs involved in that life as premise stands to conclusion. Rather an agent's excellent life is characterized by having those beliefs, and most beliefs will not be about that agent's disposition or life, or about other people's dispositions, but about the social world. That life will involve, for instance, the agent's using some thick concepts rather than others. Reflection on the excellence of a life does not itself establish the truth of judgments. Instead it shows that there is good reason ...to live a life that involves those concepts and those beliefs.... The objective grounding would not bring it about that the judgments using those concepts were true or could be known. But it would enable us to recognize that certain of them were the best or most appropriate thick concepts to use....

This would be a structure very different from that of the objectivity of science. There would be a radical difference between ethics and science, even if ethics were objective in the only way in which it intelligibly could be. However, this does not mean that there is a clear distinction between (any) fact and (any) value; nor does it mean that there is no ethical knowledge. There is some, and in the less reflective past there has been more....

cf. Nozick, p. 535:

There are two famous chasms in ethics that despite determined efforts no one has been able to leap across or bridge: the one between the is and the ought (fact and value) and that (within the ought) between moral form and moral content.

While, on Nozick's view, the chasm cannot be bridged, he suggests several possibilities for avoiding it:

(1) Values enter into the very definition of what a fact is; the realm of facts

cannot be defined or specified without utilizing certain values.

(2) Values enter into the process of knowing a fact; without utilizing or presupposing certain values, we cannot determine which is the realm of facts, we cannot know the real from the unreal. If certain values are embodied in our procedures for telling the real from the unreal, the facts from the unfacts, then it is impossible to stand firmly on the fact side of the fact-value distinction, while treating the other side as vaporous.

(3) The same processes or principles that carve facts out of the undifferentiated, unconceptualized stuff also carve out values....

Nozick sees this process as a "deep cognitive psychological" one. That it is a deep psychological process we do not dispute. However to describe it as cognitive is unfortunately reductionistic. Instead it is a valuational process. He continues (p. 537):

> Yet another theoretical possibility accepts these chasms as real and wide; it tries to explain why they hold, perhaps hoping that the explanation of the chasms...might help us across.

and on p.539 proceeds to argue that the is-ought or fact-value gap arises in the course of taking ethical truths seriously, looking for deeper explanatory truths:

> If explanation involves a derivation...of what is to be explained from what does the explaining, then this last mode of explanation requires that an ought be derived from an is. Note that this issue and problem does not depend on trying to justify or convince someone of an ethical statement. The task is not to provide agreement that the ethical statement is true, but rather to understand why it is true.

There follows the statement (p.541):

Furthermore, we might especially hope to find [an explanatory principle] so deep that it subsumes and thereby explains itself...

It is not until Nozick revisits the issue on pp.568-570, that we are given more details:

Given the choice that there be value, against the premiss that value exists, what is the relationship of value to fact? Are some facts, the organically unified ones, then identical with value(s)? I want to say: the relationship is organic unity --values are organically related to (some) facts.... The choice that there be value brings (some) facts into an organic relationship with value, unifying these but not identifying them...

The gap between fact and value, bridged but not erased by our reflexive choice that there be value, should not be viewed as wholly negative. Though this gap allows some to deny the existence of value, it bars reductionist denigrations of value, which see it as nothing but something lesser....

Here we come upon the foundation, the bridgehead, for asserting that conscience is the bridge between fact and value. But the strange loops of conscience also bridge between cognition in general, attachment, affect, volition and valuation.

Finally, cf. MacIntyre, pp. 57-58:

[Some later moral] philosophers have suggested , in an argument in which any attempt is made to derive a moral or evaluative conclusion from factual premises something which is not in the premises, namely the moral or evaluative element, will appear in the conclusion. Hence any such argument will fail. Yet in fact the alleged unrestrictedly general logical

principle on which everything is being made to depend is bogus--and the scholastic tag applies only to Aristotelian syllogisms. There are several types of valid argument in which some element may appear in the conclusion which is not in the premises.... from the premise 'He is a sea captain,' the conclusion may be validly inferred 'He ought to do what a sea captain ought to do.'... an 'is' premise can on occasion entail an 'ought' conclusion. Yet [the] claim [of adherents of the 'no " ought" from " is" view'] may still have substance, but a substance that derives from a particular, and in the eighteenth century new, conception of moral rules and judgments. It may, that is, assert a principle whose validity derives not from a general logical principle, but from the meaning of the key terms employed. Suppose that during the seventeenth and eighteenth centuries the meaning and implications of the key terms used in moral utterance had changed their character; it could then turn out to be the case that what had once been valid inferences from or to some particular moral premise or conclusion would no longer be valid or to what seemed to be the same factual premise or moral conclusion....

MacIntyre proceeds to argue that there is validity in arguing from facts to values when the concept is functional. As examples he identifies 'watch' and 'farmer' as concepts defined by purpose or function such that one can validly conclude that x watch or y farmer is a good watch or farmer because it or s/he fulfills the purpose. He then asserts:

> ...moral arguments within the classical Aristotelian tradition... involve at least one central functional concept, the concept of man having an essential nature and an essential purpose or function; and it is when and only when the classical tradition in its integrity has been substantially rejected that moral arguments change their character so that they fall within the scope of some version of the 'No "ought" conclusion from "is" premise' principle.

13. Nozick, p.445.

14. Nozick, p.457.

15. In the conscience study, we have identified stages of conscience development and domains of conscience functioning. Within a given stage, among the different domains, there is considerable room for diversity and individuality. The within-stage varieties of moral experience and expression might best be subsumed by the term conscience styles or conscience contours. We have not made a formal study of conscience styles or contours although the composition of some stages in conceptualization of conscience is the first indication that they are there. For example, we found both a brain/mind and a heart conscience at Stage II, both a symbolic and a personified conscience at Stage III. Perhaps the next approximation of conscience styles is to be found in understanding the prominence of one or more domains of conscience functioning over the other domains in a particular person. The role of temperament in the contouring of conscience has been described best by Kochanska (see references). For a discussion of the desiderata of diversity in moral philosophy see :
Rorty, A. (1993): What it takes to be good, moral systems as practical directives for character formation. In : THE MORAL SELF   (ed. G. Noam & T. Wren) MIT Press, Cambridge, Mass.
Also cf. Nozick, pp. 446-450:

> Values are organic unities; something is intrinsically valuable in
> accordance with its degree of organic unity. However it does not follow
> that the realm of values itself exhibits high organic unity that diverse and
> apparently conflicting values can be united in some higher unity or larger
> harmony. The theme of the ineradicable plurality of values, of the conflict
> between different values that cannot all be realized... has been

subordinated to the theme or hope of the harmonious reconciliation and realization of all values.... A person who tracks bestness, who seeks value, will have to formulate her own package of value realization; she cannot simply "maximize" on the value dimension. This package need not be an aggregate, it can pattern and unify the diverse values it realizes. In thus patterning value, the person may emulate a previous pattern exhibited by a value exemplar or described in some tradition, or she may create a new complex unity, sculpting the value contours of her life in an original, perhaps unique way...

and Nozick, p. 507 ff: Harmonious Hierarchical Development.

Would conscience fail to demonstrate further growth, if progress is arrested in some domains --or if there fails to be a dialectical interaction among the domains? Does moral flourishing require complex integrations across conscience domains in such a way that no particular bedrock value is the greatest good but the concept of good lies in how realizing any value entails realizing the others? MacIntyre (p.157) makes some exceptions to Aristotle in what he otherwise characterizes as his Aristotelian ethics. Contrary to Aristotle (and Plato,too), he sees the possibility of conflict arising among the virtues. An example is a courageous soldier fighting for an unjust cause.

16. The table provides the starting point for a psychological critique of each moral philosophy that lays exclusive claim to a most valuable of all values, a greatest good, a summum bonum. The crux of this critique is that there is not, on developmental psychological grounds, an Archimedean point from which leverage can be applied to elevate the bedrock value associated with any one domain to the status of summum bonum. Rather, each bedrock value has a claim on our moral reasoning and choosing. The table is accompanied by a supposition and a caveat. The supposition: while its unique appeal may be due to an emphasis upon a value associated with a single conscience domain, a moral

philosophy endures and becomes great according to its resonance and compatibility with values associated with every conscience domain. Nozick makes this very point in reference to two of them. Nozick, pp. 494-498:

> There are two powerful and intuitively appealing molds
> into which theorists have fitted or poured substantive ethics:
> a deontological one and a teleological one....

Particularly interesting from the standpoint of conscience is Nozick's idea (p.495) that deontology and teleology may relate to what he calls (p. 401) ethical pull (elaborated pp. 451-473) and ethical push (elaborated pp. 403-450), respectively. The idea of applying both teleological and deontological perspectives, inter alia, to ethical issues is discussed by Nozick, Williams, and, popularly, by Kidder.

17. Coppleston, vol.1, p.433. Epictetus, among the later Stoics, advises the daily examination of conscience.

   With regards to Medieval Christian Ethics, Haldane [see Haldane (1993): Medieval and renaissance ethics, In: A COMPANION TO ETHICS, pp. 133-146.] relates that St.Jerome (347-420) introduced the term 'synderesis' to refer to the innate power of distinguishing good from evil, referring to it as the spark of conscience, a similar intuitionist version of conscience is found in St. Augustine (354-430) whereas St. Aquinas, while allowing for synderesis regards conscience as equivalent to right reason.

   Contrary to the view that conscience must be followed, advocated by Ockham in the Middle Ages, in 1651, Hobbes wrote in LEVIATHAN (see: Hobbes, T. (1957) Leviathan. M. Oakeshott. Oxford University Press, Oxford. Part 1, chapter 1.)

> Another doctrine repugnant to civil society is that whatsoever a man
> does against his conscience, is sin; and it dependeth on the presumption
> of making himself judge of good and evil. For a man's conscience and his

judgment are the same thing, and as the judgment, so also the conscience may be erroneous....

With regards to modern philosophers, in Coppleston, vol. V, p.172ff., one finds reference to the Earl of Shaftesbury (1671-1713) who considered every man, to some degree at least, capable of perceiving moral values, of discriminating between vice and virtue. This he called moral sense, which he assimilated to the aesthetic faculty. Hutcheson (1694-1746) took up the subject of moral sense:

> By the moral sense 'we perceive pleasure, in the contemplation of such (good) actions in others, and are determined to love the agent (and much more do we perceive pleasure in being conscious of having done the actions ourselves) without any view of further natural advantage from them...

This brings us to Bishop Butler who,

> In the Dissertation of the Nature of Virtue ...speaks of conscience as 'this moral approving and disapproving faculty [which might be] called conscience , moral reason , moral sense, or divine reason; whether considered as a sentiment of the understanding or as a perception of the heart, or which seems the truth, as including both.'....

As subsequently described by Coppleston (pp. 318ff.), David Hume bases morality on passion as opposed to reason, he introduces p. 323) his idea of sympathy (which would today be called empathy) and defines virtue (p.331) 'to be whatever mental action or quality gives to the spectator the pleasing sentiment of approbation; and vice the contrary.' After Hume, in 1759, the Scottish economist, Adam Smith, entitled a work THEORY OF MORAL SENTIMENTS wherein sympathy is contradistinguished from self-interested

affection as an original sentiment of human nature. It is also contradistinguished from moral sense (Coppleston, p.356):

> And there is no need to postulate a distinct 'moral sense,' which expresses itself in moral approval or disapproval. For 'to approve of the passions of another, as suitable to their objects, is the same thing as to observe that we entirely sympathize with them ; and not to approve of them as such is the same thing as to observe that we do not entirely sympathize with them'...

Smith balances his emphasis on sentiment by allowing for the concept of spectator idealized as the impartial spectator (Coppleston, p.359):

> 'I divide myself, as it were, into two persons ...the first is the spectator... the second is the agent... of whose conduct, under the character of a spectator, I was endeavoring to form some opinion...

In terms of conscience domains as we have described them, Smith seemingly collapsed the domains of moral emotional responsiveness and valuation, in effect reducing value to emotion (as others have attempted to reduce value to cognition) but preserved both conceptualization (in the form of spectatorship) and volition.

Coppleston (p.361) points out that the moral sense school had psychologizing tendencies, which perhaps accounts for their pertinence, however partial, to our psychology of conscience.

> The contemporary psychology of empathy owes much to the work of Martin Hoffman, see references.

For a more contemporary and popular treatment of the subject, see Wilson, J.Q.

(1993): THE MORAL SENSE. The Free Press, New York.

Some other Western philosophers who dealt with the concept of conscience are Hegel who argued that both universal objective good and moral conscience, or subjective will, are abstract and belong to the intermediate sphere of Moralitat as opposed to higher ethical life, Sittlichkeit see Collins, J. (1967): THE MIND OF KIERKEGAARD, Henry Regnery & Co., Chicago. p.117, and Hegel's Philosophy of Right and Law [see Hegel, F. (1954) in THE PHILOSOPHY OF HEGEL (C. Friedrich, ed.) the Modern Library, New York. pp. 251-260.

Since we have introduced the metaphor, conscience as bridge, it is instructive to read Hegel who described conscience as a moment in an ongoing dialectic to the Ethical. Conscience slips into the dialectic as Hegel describes three aspects of the right of moral will. These aspects are

> a) the formal right of action such that the content of the action is mine and represent the purpose of my subjective will.

> b) the special character of the action , its inner content as it is for me {what we take to be intentionality--MG.}, and its content as the special aim of my individual well-being,

> c) This inner content in its universality, as elevated into absolute, existing objectivity, is the absolute aim of the will -that is, the Good. This is the sphere of the reflection with the antithesis of subjective universality, partly of evil, and partly of conscience...

Conscience emerges again in the description of the transition from Morality to Ethics:

> The Good is yet abstract. But, as the concrete substance of freedom, it demands determinations or qualities in general, as well as the principle of freedom, as identical with the Good Conscience, which is yet only an abstract principle of determination, likewise demands that its

determinations be given universality and objectivity. We have seen how both good and duty, when either of them is raised to independent universality, lack the specific definite character that they ought to have. But the integration of both the Good and Conscience as relatively independent is potentially accomplished in their organic unity. For we have seen subjectivity vanishing into its own emptiness, already posited (in the form of pure self -certitude or conscience) as identical with the abstract universality of the Good. This integration of the Good and Conscience is the real truth of them both. It is their concrete organic unity. This unity is the sphere of Ethics, or the concrete ethical world of social life....

Hegel often requires an interpretation to make his ideas clear. These remarks on THE PHILOSOPHY OF SPIRIT by Mure, G. (1965): THE PHILOSOPHY OF HEGEL, London Oxford University Press, New York, pp. 168-169 may help:

The subjective moral will, in so far as it is a unity, emerges as conscience, having for its ideal a universal goodness, the absolute final aim of the world of men and things. Conscience claims as a right and a duty to have insight into this ideal good, to intend it, and to realize it in action; and this is its own goodness. But as inward, particular, and subjective, it cannot fulfill this duty nor justify its claim to sacrosanct autonomy. Not only may contingency frustrate its purpose, but its insight is fallible. It may deceive itself and give any false content to its intention.... it may intend only its own self-interest...

Hegel's transition from morality to ethical life is obscure in detail but clear in outline. With the recognition that inner purity is impotent and wide open to perversion, the will moves outward ...to achieve a concrete objective freedom. This it does by bringing self-consciousness the unconscious forgotten basis of custom and convention, which is already in it, and recreating this and (so itself) in social and political institutions, the family, society, and the State. These it now recognizes for what they are,

namely its only means to realize its abstractly subjective freedom and goodness by articulating and making good through them its vague ideal of good which ought to be, its only way to justify ...its premature claim as particular subjective conscience to autonomy of judgment and action....

17. MacIntyre, pp. 146-164. N.B.: MacIntyre's project to revitalize Aristotelian Ethics requires a teleological account to substitute for Aristotle's own metaphysical biology. Provisionally (pp. 219-220), he concludes that the good life is the life spent seeking the good life and the virtues necessary for the seeking are those which will enable us to understand what more and what else the good life is. Hence, for example, Aristotelian ethics has been characterized by MacIntyre in terms of a view that human beings have a certain nature which disposes them to certain aims and goals (telos), that virtues are those qualities the possession of which enable a person to achieve well-being (eudaimonia) and the lack of which frustrate movement toward that telos, and that there are intellectual virtues and virtues of character the pursuit of which entails using practical reason to achieve balance and striving towards a golden mean (sophrosyne). These activities occur within practices associated with roles that arise from traditions of the polis. Rough correspondences between domains of conscience and elements of an Aristotelian virtue based ethics include:

'phronesis' (practical wisdom) " a true disposition towards moral judgment, part of action by the aid of a rule with regard to things good and bad." see Coppleston (1993), volume I,p.343.	CONCEPTUALIZATION Here understood as moral judgment
'telos'	VALUATION

'eudaimonia'	MORAL EMOTIONAL RESPONSIVENESS, (especially "be good /feel good" homeostasis)
'sophrosyne'	MORAL EMOTIONAL RESPONSIVENESS
'polis'	MORAL ATTACHMENT, AUTHORITY-DERIVED VALUATION.

19. Nozick, pp. 403-450.

"Free will vs. determinism" is sometimes referred to as a metapsychological as well as a philosophical issue. The real or perceived problem has been to reconcile our sense of agency with a completely physicalistic account of the universe (I leave aside the issue of psychic determinism which figures historically in psychoanalytic theory). Hence, the issue might better be stated " free will vs. physicalism (also called materialism)" irrespective of whether the physicalistic universe is deterministic or indeterministic / probabilistic. Our sense of agency does not stand alone as having problems being reconciled with a completely physicalistic account of the universe. All our inner states do. This is generally called the "mind--body problem," and although Cartesian dualism has been discounted, a satisfying resolution of the problem has yet to be advanced in the context of physicalism. Sometimes the concept of "biological emergence" is suggested to account for our subjective experience of being inside, of having inner states. Radical (eliminative) materialists [see Rorty,R. (1971): In defense of eliminative materialism. In D. Rosenthal (ed.) MATERIALISM AND THE MIND BODY PROBLEM, Prentice-Hall] once proposed doing away altogether with

mental state language. Others believe that the problem can be dissolved rather than resolved by paying close attention to our language and " What we cannot speak about, we must pass over in silence," as Wittgenstein of the Tractatus advises (Wittgenstein, L. translated by D.F. Pears & B.F. McGuiness (1974): TRACTATUS LOGICO PHILOSOPHICUS, Humanities Press, Great Britain, p.74). For many people there are difficulties with any of these approaches. Generally, on the issue "free will vs. determinism," individuals who take positions describe those positions as 'libertarian' (free will exists and is not compatible with determinism- although it is difficult to say how the introduction of chance into the universe helps at all, since what is really wanted is uncaused but not capricious causality), 'compatibilist' (free will exists and is compatible with determinism), or free will does not exist in our universe whether or not our universe is deterministic. Of course, from the standpoint of moral developmental psychology (or perhaps any rational standpoint whatsoever), this issue cannot be settled. There are, however, empirical questions that can be:

> " Do people universally have a sense of agency?",

> " If so, how do they conceptualize their sense of agency in the course of development?"

Children are not apt to spend much time in philosophical speculation. Still from the moral psychological point of view, an adult's response to the free will/ determinism issue and mind/body problem may be useful projectively in understanding how s/he conceptualizes his/her conscience viz a viz chains of cause and effect beginning before that person was born. See reference list.

20. To illustrate this we have chosen two early existentialists with two very different views on moral development: Søren Kierkegaard and Friedrich Nietzsche. See references for suitable anthologies.

Søren Kierkegaard (or 'S. K.' to follow the customary abbreviation used by many of his interpreters and biographers), the Danish philosopher who has been called the father of existentialism, wrote his devotional works in his own name but adopted pseudonyms for his psychological and philosophical works. He indicates

in his Journals that his intent in writing pseudonymously is to underscore that with each pseudonym, he is taking a certain point of view or perspective, offering both the advantages and disadvantages of a limited scope. So long as his readers recognize the limitations they will not be deceived into thinking that a particular pseudonym represents S.K.'s final point of view, which he says is to be found in his devotional works. S.K.'s project is not unlike shifting from the perspective of psychology on morality and religion to a theological perspective on psychology.

In one pseudonymous work entitled EITHER / OR S.K. first contrasts the aesthetic and the moral views of life. In another book entitled STAGES ON LIFE'S WAY S.K. identifies an aesthetic stage, a moral stage and a religious stage. For each stage he identifies an exemplar: Don Juan, Socrates and Abraham, respectively. The moral stage S.K. depicts is fairly consonant with Kant's ethics, the idea of the categorical imperative (Kant's version of the Golden Rule states that a person should always will his actions in such a way that he would accept them as universally applicable). It is in one of his psychological works entitled Fear and Trembling that S.K. does the amazing thing of showing religious faith in conflict with conscience. He does this by visiting and revisiting the story of Abraham and Isaac on Mount Moria. Loving father and beloved son are instructed by God to ready themselves for a sacrifice. Only Abraham knows that God has further instructed him that his son will be the one sacrificed. S.K. is so impressed by Abraham's suffering in the face of this dilemma created by a conflict not only with his love for Isaac but also with the moral duty to others ("Thou shalt not kill") he coins the phrase "religious horror" to describe the experience. He also describes Abraham as being subject to a teleological (i.e. the end justifies the means) suspension of the ethical. The Abraham-Isaac motif is a powerful example of potential conflict between religious and moral values. S.K.'s use of this motif serves to distinguish moral mandates from religious ones, although he did not mean to imply that in ordinary circumstances the two were in conflict. On the contrary, he would have agreed with the notion that grace builds upon nature, that just as the moral domains of personal development do not

absolutely negate the aesthetic domains, the religious domains of personal development may transform but do not absolutely negate the moral domains. Unless someone's psychotically delusional, we may be inclined to reassure ourselves, he or she is not going to attribute to God such a suspension of the ethical. Then we think of zealotry and we think of terrorism and we think of racism and we think even of religious intolerance and we appreciate our own modern day religious horrors. God's compassion for Abraham's suffering is manifest in the appearance of an angel who stays Abraham's hand before he strikes a lethal blow at his son. While there is evidently a shortage of angels in our time, perhaps there is nonetheless a message in the Abraham-Isaac story that God does not usually intend double binds generated by religious development on the one hand and moral development on the other. Indeed an alternative exegesis of the story of Abraham and Isaac might explore the implied message that God's good, while not always clear to us, is generally consonant with our moral sense, and that God makes no exemption for God in expecting goodness.

Nietzsche was also a moral philosopher who long ago provided a polemical critique of human moralities. One can almost hear him launch into a tirade disparaging ordinary conscience functions (at least as pertains to pro-social development) as following "the herd instinct". And yet he also saw   some human beings as forever fated to be value-makers and choosers, ultimately exhorting them to revaluate all values, and above all flourish creatively. Nietzsche's philosophy begins with the proposition that God is dead, raising the specter of nihilism, the absence of an ultimate ground for values--not in religion and not in metaphysics. And yet the best human beings, the forerunners of the Ubermensch (the Overman), are able to sublimate the will to power that drives life, in embracing their fate (amor fati), in artistic creativity beyond good and evil, the very possibility of which is sufficient to merit an affirmation of the eternal recurrence of the same, a doctrine capable of producing nausea in all others. A consideration of Nietzsche's work raises the issue whether there are ways to liberate morality from (as opposed to amoralizing) the domains of conscience

while preserving some (namely its autonomous) functionality. MacIntyre, p. 113-114:

> For it was Nietzsche's historic achievement to understand more clearly than any other philosopher---certainly more clearly than his counterparts in Anglo-Saxon emotivism and continental existentialism --not only that what purported to be appeals to objectivity were in fact expressions of subjective will, but also the nature of the problems that this posed for moral philosophy...
>
> In a famous passage in The Gay Science (section 335) Nietzsche jeers at the notion of basing morality on inner moral sentiments, on conscience, on the one hand, or on the Kantian categorical imperative, on universalizability, on the other.... The underlying structure of his argument is as follows: if there is nothing to morality but expressions of will, my morality can only be what my will creates. There can be no place for such fictions as natural rights, utility, the greatest good for the greatest number. I myself must bring into existence 'new tables of what is good.'

MacIntyre considers contemporary moral philosophy to be presented with a choice between essentially Nietzschean and Aristotelian premises, p. 114:

> Whenever those immersed in the bureaucratic culture of the age try to think their way through to the moral foundations of what they are and do, they will discover suppressed Nietzschean premises....

What appears to be (to some) the spectre of Nietzsche is, interestingly, a concern of Pellegrino, in the context of medical ethics. See Pellegrino, E.D. (1993) : The metamorphosis of medical ethics, a 30 year retrospective. JAMA, 269, 1158-1162:

> Elaboration of a new underpinning for medical ethics will be greatly

complicated by the parlous state of contemporary philosophy and ethics and the strong current of nihilism and skepticism in both fields. In philosophy for example, [R.] Rorty denies the possibility of arriving at any truths through philosophy and the relevance of any theory of reality. Derrida likewise denies that there is any truth, only the appearance of truth and words to which we impute whatever meaning they may have for us. [Bernard] Williams takes the same skeptical view of ethics and moral accountability. These writers demolish philosophy, theology, and ethics simultaneously, in full capitulation to the Nietzschean legacy. For Nietzsche, the idea of one truth was an illusion: all we are capable of discussing are multiple truths seen from many incommensurable perspectives....

While Pellegrino correctly identifies perspectivalism and rejection of rationalism as elements of Nietzsche's philosophy, it is not clear that Nietzsche was, himself, at all relativistic. He had, after all, definite opinions about 'slave morality', rejecting it on behalf of the Ubermenschen, who were called to creatively overcome nihilism in self-affirmation in the face of all that is and was (eternal recurrence). Relativism implies a certain amount of tolerance, notably lacking in Nietzsche. Williams, whom Pellegrino mentions in the above passage, notes in his discussion of relativism (pp. 158-159):

> ...[I]t is implausible that ethical conceptions of right and wrong have a logically inherent relativity to a given society.... [S]uppose [a hypothetical hypertraditional society] does have some rules expressed in terms of something like "right" and "wrong." When it is first exposed to another culture and invited to reflect, it cannot suddenly discover that there is an implicit relativization hidden in its language. It will always be too early or too late for that. It is too early when they have never reflected or thought of an alternative to "us." ...It is too late when they confront the new situation; that requires them to see beyond their existing rules and practices. It now

looks as if relativism may be excluded altogether. The fact that people can and must react when they are confronted by another culture, and do so by existing notions -also by reflecting upon them -seems to show that the ethical thought of a given culture can always stretch beyond its boundaries. It is important that this is a point about the content or aspirations of ethical thought, not about its objectivity. Even if there is no way in which divergent ethical beliefs can be brought to converge by independent inquiry or rational argument, this fact will not imply relativism....

Nevertheless, while it is true that non-objectivity does not imply any relativistic attitude, there does seem something blank and unresponsive in merely stopping at that truth. If you are conscious of non-objectivity, should that not properly affect the way in which you see the application or extent of your ethical outlook? If so, how? This consciousness cannot just switch off your ethical reactions when you are confronted with another group, and there is no reason why it should. Some people have thought it should, believing that a proper relativistic view requires you to be equally well disposed to everyone else's ethical beliefs. This is seriously confused, since it takes relativism to issue into a non-relativistic morality of universal toleration. But the confused reaction is certainly a reaction to something. If we become conscious of ethical variation and of the kinds of explanation it may receive, it is incredible that this consciousness should leave everything where it was and not affect our ethical thought itself. We can go on, no doubt, simply saying that we are right and everyone else is wrong...but if we have arrived at this stage of reflection, it seems a remarkably inadequate response. What else is possible? ...We should ask how much room we can coherently find for thinking like this, and how far it provides a more adequate response to reflection....

This does not seem to be a particularly destructive point of view. In fact it is a view that one could characterize as embodying the Piagetian processes of

assimilation and accommodation. Conscience contours are shaped by new ethical experiences, reflected upon by the person. There will be efforts to assimilate what can be assimilated, and sometimes to accommodate, shaping new contours. There will also be resistance mounted to efforts to reshape some contours, considered to make an important difference. The view is as much developmental as it is relativistic. It is also noteworthy, and lends credence to what Williams is stating, that the previously discussed cross-cultural study of Shweder et al. (1987) included questions that tapped into the issue of relativism in the form of what was acknowledged to be conventional vs. context-dependent moral thinking (p. 59):

> A more abstract formulation of that context dependent moral argument [given in a minority position among Brahmins] goes something as follows. America is a young civilization. India is an ancient civilization. It takes a long time for a civilization to figure out and evolve good or proper practices and institutions, those that are in equilibrium with the requirements of nature. You should not expect the young to possess the wisdom of the old. America is doing what is fitting or normal for its early stage of development. Its practices are not arbitrary....

Returning To Williams (p. 160):

> If we are to accommodate the relativists concerns, we must not simply draw a line between ourselves and others. We must not draw a line at all, but recognize that others are at varying distances from us. We must also see that our reactions and relations to other groups are themselves part of our ethical life, and we should understand these reactions more realistically in terms of the practices and sentiments that help shape our life. Some divergences and disagreements matter more than others. Above all, it matters whether the contrast of our outlook with another is one that makes a difference, whether a question has to be resolved about

what life is going to be lived by one group or the other...

In spite of his polemical comments regarding Williams, Pellegrino (p.1162) seems to agree with Williams regarding cross-cultural medical ethics:

> Such radical relativism is reinforced by the worldwide surge of cultural hegemony in morality. In this view the medical ethic that has supplanted the Hippocratic ethic is a Western product and incompatible on various grounds with other cultures, particularly regarding autonomy. As the Western version of ethics comes into contact with other cultures, we can expect sharply defined points of conflict and agreement. Yet medical ethics holds more hope for a better grounding of principles, rules, virtues, and moral psychology than any other field of ethics....

21. MacIntyre, p.191.

The first stage definition of virtue is refined in two other stages, which require unity of life and a concept of tradition. (Ibid, pp. 204 ff.) This is most succinctly stated in the Postscript to the Second Edition (p. 273):

> My account of virtues proceeds through three stages: a first which concerns them as qualities necessary to achieve the goods internal to practices; a second which considers them as qualities contributing to the good of a whole life; and a third which relates them to the pursuit of a good for human beings the conception of which can only be elaborated and possessed within an ongoing social tradition.

22. Ibid, p.187.

23. Ibid, p.190.

24. Ibid, pp. 190-191.

25. Ibid, pp. 218-219.

Narrative history is essential to the account of virtues as well:

A central thesis then begins to emerge: man is in his actions and practice, as well as in his fictions, essentially a story telling animal. He is not essentially, but becomes through his history, a teller of stories that aspire to truth. But the key question for men is not about their own authorship; I can only answer the question 'What am I to do?' if I can answer the prior question ' Of what story or stories do I find myself a part?' We enter human society, that is, with one or more imputed characters--roles into which we have been drafted--and we learn what they are in order to be able to understand how others respond to us and how our responses to them are apt to be construed. It is through hearing stories about wicked stepmothers, good but misguided kings, wolves that suckle twin boys, youngest sons who receive no inheritance but must make their own way in the world and eldest sons who waste their inheritance on riotous living and go into exile to live with the swine, that children learn or mis-learn both what a child and what a parent is, what the cast of characters may be in the drama into which they have been born and what the ways of the world are....

26. There may be means by which the organic unity of conceptualization, attachment, emotions, valuation and volition can develop independently of conscience - that is, amorally- for example, via bridges that are associated with an aesthetic sense or, perhaps, a kind of undifferentiated valuation driven by the will to power (what Nietzsche had in mind). The repudiation of conscience, while a repudiation of part of human nature, is nonetheless possible to humans. One may choose to reject conscience. Amoralized or demoralized domains of conscience can still be (dys)functional. For example, as Nozick mentions, sadistic enjoyment of another's suffering may require an exquisite sensitivity to

feelings comparable to empathic responsiveness but uncoupled from good will. Nor do we believe that a conscience-centered ethics can be summarized as "Let your conscience be your guide." Of course we must let our consciences guide us---but we must also guide, and accept guidance for, our consciences. Because also possible are conscience malformations (speaking in structural terms) or distortions (speaking in functional terms), in which, the contours of conscience have been principally or substantially shaped by racial, gender or other prejudices or have been disguised by individual egoism or institutional survivalism. Some of our work has been with children, maltreated early in life, in whom conscience functions, it is true, but functions amidst developmental delays and psychopathological interferences. At the extreme, dissociation of the links between the conscience domains, what has been termed demoralization, leaves a person unable to maintain the organic unity of conscience conceptually, subject to meaningless reverberations of moral emotions, unable to seek, keep or make values and subject to paralysis in the face of having to make choices. Bidirectional causality must be understood in this way: the inherited vulnerability to and/or the transduction of stress or trauma into depression (or chronic PTSD) operates at a neurobiological level that delays conscience development and subverts conscience functioning. In particular, depression is a disorder of mood but certainly as much if not more, one of valuation and volition. We claim there is a psychobiology of conscience to be advanced. To make this claim is to reject a completely reductionistic approach to science. We stand at a post skeptical rationalist station of inquiry, as described by Overton and Horowitz (see endnote #8): "order is brought into the manifest world by constructing abstract, normative patterns that plausibly , intelligibly and coherently systematize the domain of inquiry. These patterns originate in abductive or retroductive inference processes, which originate in metaphor and metatheoretical assumptions. Causal laws, or general antecedent-consequent functional relations become formulated within , and derive their meaning from, the pattern context. Testing proceeds according to criteria including scope of application, depth, logical consistency, fruitfulness, viability and empirical support." Hence there is a role for empirically

testing hypotheses in a reductionistic framework. Our group had, for example, an a priori hypothesis that serum dopamine hydroxylase activity would be lower in boys who had lower scores in the conscience domain of valuation.

27. From the outset a person is engaged in wonder. Wonder was recognized by the Greeks as the beginning of philosophy. Heidegger understood our need to be reminded of it. Engagement in wonder, as it is moralized, as it unfolds morally is the beginning of the moral adventure, which just may be an equivalent term for conscience in its formation and its practiced use. The connection between conscience and human Being (Dasein) was emphasized by Heidegger this way:

> Conscience gives us "something" to understand; it discloses... It is revealed as a call. Calling is a mode of discourse. The call of conscience has the character of an appeal to Dasein by calling it to its own most potentiality- for -Being--its--Self... (see W.T. Jones volume V, pp.316-17 for additional commentary).

A person is engaged in wonder in different ways as developments permit, according to processes that become recognizably thoughtful, emotional, relational, valuational and volitional. Thoughtful engagement may be seen as interest. Emotional engagement may be seen as care. Valuational engagement may be seen as approval or affirmation. Volitional engagement may be seen as concern, by which is meant a call to choose.

28. Research that has been done in this area pertains to moral reasoning among professionals. See: Self D. & Baldwin, D. (1994): Moral reasoning in medicine. In: J. Rest & D Narvaez (ed.): MORAL DEVELOPMENT IN THE PROFESSIONS, Lawrence Erlbaum and Associates, Hillsdale, N.J. pp. 147-162. The authors identify two waves of studies in medical students. The first was 1977-1985 and the second 1985--present. Studies of moral reasoning have primarily featured instruments derived from Kohlberg's cognitive developmental moral theory:

Rest's Defining Issues Test (DIT)

Kohlberg's Moral Judgment Interview (MJI)

Gibbs' Sociomoral Reflection Measure (SRM)

One interesting finding by Sheehan's group (1980, see Self & Baldwin's references) in "the first wave", cited in this review was that" a high level of moral reasoning virtually excludes the possibility of being a poor performer and conversely that a low level of moral reasoning virtually excludes the possibility of performing well."

In "the second wave", Self et al. (1989, 1992, 1993 see Self & Baldwin's references) conducted longitudinal studies on the possible effects of medical education on moral development and concluded that there was a "lack of increase in moral reasoning and development generally expected in this age group, suggesting a possible inhibiting effect of this educational experience." They also introduced the empirical assessment of moral reasoning in the evaluation of teaching medical ethics. They found an increase in moral reasoning level in students exposed to the medical ethics course regardless of format (either lecture or case study discussion). Another interesting finding by Baldwin et al. (1991, cited in the review): there have been consistently higher moral reasoning scores in women than in men in every year of medical school. Self and Baldwin write:

> Many of the research studies...indicated consistently higher levels of moral reasoning for men than for women, calling into question the highly publicized contention of Gilligan...and others that women generally score lower on Kohlberg's moral dilemmas because of their different moral orientation. Since the use of the DIT in this study did not appear to work to the disadvantage of the women subjects, it would seem that the DIT and other Kohlberg measures of moral development can be appropriately used...

However, despite this finding,

> ...considerable interest remains in further exploring the dimension of the orientation of caring as proposed by Gilligan (1982) and Noddings (1984) and others. Self and Skeel (1992) developed an interview instrument for assessment of moral reasoning and moral orientation in a single interview (MROI).

The MROI was used to assess the influence of philosophical vs. theological education on the moral development of clinical medical ethicists. They were not significantly different in their moral reasoning skills, nor in their moral orientations toward justice or care (defined as recognition, predominance and alignment with the relevant concepts). No significant relationship was found between age or gender and moral reasoning or orientation. In comparing these clinical ethicists to practicing physicians, the physicians scored lower in moral reasoning, but were not found to be different in moral orientation compared to the clinical ethicists. Among physicians, however, older ones scored higher in moral reasoning and women were more likely than men to recognize elements of care in moral dilemmas, men more likely to recognize justice.

Looking specifically at moral orientation in medical students with the Gilligan Real Life Conflict and Choice Interview (Brown et al., 1988 cited in review) Self et al. (1993 cited in review) found the moral orientation of 20 medical students to be as follows:

> recognition of justice issues in 95% of the moral conflicts;
> care in 90%
> predominance of justice as the organizing resolution principle in 30% of responses; care in 55%
> alignment with justice as the preferred mode of resolution -20%;

care in 25%

only 15% of the medical students demonstrated a balanced
approach where neither care nor justice predominated.
Gender difference as predicted by Gilligan's claim justice
orientation 66.7% in males 33.3% in females; care orientation
72.7% in females 27.3% in males.

They conclude that

there may be other moral aspects besides justice and care that
form the structure of moral reasoning in medical students …Other
possible moral ideals need to be explored , including those of
benevolence, following authority , and adherence to religious
teachings.

It seems likely that the HEALTH PROFESSIONAL CONSCIENCE
INTERVIEW (Galvin, in development), an adaptation of the semi-structured SCI,
may provide an excellent means to explore this matter further since it is sensitive
to 5 conscience domains and associated intrinsic (bedrock) values and is not
constrained by the bipolar analysis for justice and care.

The question regarding how our professions' teachers can help shape
conscience contours has its counterpart in the recent literature on education of,
for example, nurses and psychiatric residents in ethics. See: Duckett, L. &
Ryden, M. (1994) Education for ethical nursing practice. In Rest and Navaez:
pp.51-69:

The authors report on their multi -course sequential learning approach
(MCSL), which weaves in an identifiable strand of content throughout the
curriculum in a vertical course with units embedded in existing courses
across various levels of a program. Ethics in nursing can be viewed as the
intersection of three overlapping disciplines: nursing, philosophy (seen as
prescriptive especially of tolerance) and moral psychology (seen as
descriptive). The authors advocate an integrative theory of nursing ethics
that synthesizes caring and justice and have utilized Rest's four-

component model of moral action: moral sensitivity, moral reasoning, moral commitment or motivation, moral character, but add implementing the moral decision. They report gains on DIT scores and a positive correlation between clinical performance and moral reasoning.

See: Roberts L. & McCarty T. (eds.) (1996): Special Theme: Education of Psychiatry Residents in Ethics. ACADEMIC PSYCHIATRY 20, 3. Entire issue.

N.B. The method we advocate for further consideration couples education regarding the general nature of conscience development with reflection upon and description of the unique contours of one's individual conscience as a professional person. This method complements existing ways of supporting ethical fitness.

References

Bretall, R. (1947) : A KIERKEGAARD ANTHOLOGY, Princeton University Press, Princeton, N.J.

Kaufmann, W. (1970): THE PORTABLE NIETZSCHE, Viking Press, New York.

Chisholm, R.M. (1966) : Freedom and action. In: FREEDOM AND DETERMINISM (ed. K. Lehrer). Random House, New York. pp. 11-63.

Collins, J. (1967): THE MIND OF KIERKEGAARD, Henry Regnery & Co., Chicago.

Coppleston, F. (1993 edition): A HISTORY OF PHILOSOPHY, VOLUME I -IX

Image Books/Doubleday, New York.

Duckett, L. & Ryden, M. (1994) Education for ethical nursing practice. In: MORAL DEVELOPMENT IN THE PROFESSIONS, PSYCHOLOGY AND APPLIED ETHICS (J.R. Rest & D. Narvaez, eds.), Lawrence Erlbaum Associates, Inc., Hillsdale, New Jersey, pp.51-69:

Elkind, D. (1980). Developmental structuralism of Jean Piaget. In: THE COMPREHENSIVE TEXTBOOK OF PSYCHIATRY III (eds. Kaplan & Sadock), Wilkins and Wilkins, Baltimore, Md., pp. 371-378.

 Furlong, F.W. (1981): Determinism and free will: review of the literature. AM J PSYCHIATRY138 : 435-439.

Galvin, M.R., Stilwell, B.M., Shekhar, A., Kopta, M. and Goldfarb, S. (1997): Maltreatment, conscience functioning and dopamine beta hydroxylase in emotionally disturbed boys. CHILD ABUSE AND NEGLECT, THE INTERNATIONAL JOURNAL, 21,1: 83-92.

Gilligan, C. (1982): IN A DIFFERENT VOICE. Cambridge, MA: Harvard University Press.

Haldane (1993): Medieval and renaissance ethics, IN: A COMPANION TO ETHICS, (ed. P. Singer). Blackwell Publishers Ltd., Oxford, UK. pp. 133-146.

Hansen, C. (1993): Classical Chinese ethics. In: A COMPANION TO ETHICS (ed. P. Singer). Blackwell Publishers Ltd., Oxford, UK. pp. 74-75.

 Hegel, F. (1954) in THE PHILOSOPHY OF HEGEL (C. Friedrich, ed.) the Modern Library, New York.

Hoffman, M. (1975): Developmental synthesis of affect and cognition and its implications for altruistic motivation. DEVELOPMENTAL PSYCHOLOGY, 11,5 : 607-622.

_____(1982) : Development of pro-social motivation : empathy and guilt. In N. Eisenberg (ed.), THE DEVELOPMENT OF PROSOCIAL BEHAVIOR. Academic Press; New York.

_____(1983): Empathy, guilt and social cognition. IN: W. Overton (ed.), THE RELATIONSHIP BETWEEN SOCIAL AND COGNITIVE DEVELOPMENT. L. Erlbaum Associates; Hillsdale, N.J.

Johnson, M. (1993): MORAL IMAGINATION, IMPLICATIONS OF COGNITIVE SCIENCE FOR ETHICS. University of Chicago Press, Chicago.

Jones, W.T. (1980): A HISTORY OF WESTERN PHILOSOPHY IV AND V, second edition, revised. Harcourt Brace Jovanovich College Publishers, Ft Worth.

Kalupahana, D.J. (1995): ETHICS IN EARLY BUDDHISM. University of Hawaii Press, Honolulu.

Kant, I., translated by H.J. Paton (1964): GROUNDWORK OF THE METAPHYSIC OF MORALS, Harper and Row, New York.

Kidder, R.M. (1995): HOW GOOD PEOPLE MAKE TOUGH CHOICES. William Morrow & Co., New York.

Kochanska, G. (1991): Socialization and temperament in the development of guilt and conscience. CHILD DEVELOPMENT. 62,1379-1392.

Kochanska, G. (1993): Toward a synthesis of parental socialization and child temperament in early development of conscience. CHILD DEVELOPMENT 64, 325-347.

Kochanska, G., Padavich, D., and Koenig, A. (1996): Children's narratives about hypothetical moral dilemmas and objective measures of their conscience: mutual relations and socialization antecedents. CHILD DEVELOPMENT, 67, 1420-1436.

Kohlberg, L. (1981): THE PHILOSOPHY OF MORAL DEVELOPMENT. San Francisco: Harper & Row.

Lickona, T (1983): RAISING GOOD CHILDREN. Bantam Books, New York. p.12.

McFarland, B.H. & George, R. A. (1995): Ethics and managed care. CHILD AND ADOLESCENT PSYCHIATRIC CLINICS OF NORTH AMERICA (Ethics ed. D. Schetky) 4, 4: 885-901.

MacIntyre, A. AFTER VIRTUE, second edition, University of Notre Dame Press, Notre Dame, Indiana.

Mure, G. (1965): THE PHILOSOPHY OF HEGEL, London Oxford University Press, New York, pp. 168-169

Nozick,R.(1981): PHILOSOPHICAL EXPLANATIONS, The Belknap Press of Harvard University Press, Cambridge, Mass.

Pellegrino,E.D. (1993) : The metamorphosis of medical ethics, a 30 year retrospective. JAMA, 269, 1158-1162.

Piaget, J. (1965): THE MORAL JUDGEMENT OF THE CHILD. New York: Free

Press.

Piaget, J. (1976): Piaget's Theory. In: THE PROCESS OF CHILD DEVELOPMENT (P. Neubauer, ed.) Jason Aronson, New York, pp 164-212.

Rawls, J. (1971): A THEORY OF JUSTICE. The Belknap Press of Harvard University Press; Cambridge, Massachusetts.

Rest, J.R. (1994): Background: theory and research. In: MORAL DEVELOPMENT IN THE PROFESSIONS, PSYCHOLOGY AND APPLIED ETHICS (J.R. Rest & D. Narvaez, eds.), Lawrence Erlbaum Associates, Inc., Hillsdale, New Jersey, pp. 1-26.

Ruse, M. (1993): The significance of evolution. In: A COMPANION TO ETHICS (ed. P. Singer). Blackwell Publishers Ltd., Oxford, UK. pp. 500-510.

Roberts L. & McCarty T., eds. (1996) : Special Theme: Education of Psychiatry Residents in Ethics. ACADEMIC PSYCHIATRY, 20,3. entire issue.

Rorty, A. (199-): What it takes to be good, moral systems as practical directives for character formation. IN: THE MORAL SELF (ed. G. Noam & T. Wren) MIT Press, Cambridge, Mass.

Rorty, R. (1971): In defense of eliminative materialism. In D. Rosenthal (ed.) MATERIALISM AND THE MIND BODY PROBLEM, Prentice Hall.

Rychlak, J. (1988): THE PSYCHOLOGY OF RADICAL HUMANISM.

 Self D. & Baldwin, D. (1994): Moral reasoning in medicine. In: J. Rest & D Narvaez (ed.): MORAL DEVELOPMENT IN THE PROFESSIONS, Lawrence Erlbaum and Associates, Hillsdale, N.J. pp. 147-162.

Sellars, W. (1996) : Thought and action. In: FREEDOM AND DETERMINISM (ed. K. Lehrer). Random House, New York. pp. 103-139.

_____: Fatalism and determinism. In: FREEDOM AND DETERMINISM (ed. K. Lehrer). Random House, New York. pp. 141- 174.

Shweder, R., Mahapatra, M. and Miller, J. (1987): Culture and moral development. In: THE EMERGENCE OF MORALITY IN YOUNG CHILDREN (eds. J. Kagan and S. Lamb) University of Chicago Press, Chicago. pp. 1-90.

Stilwell, B. & Galvin, M. (1985). Conceptualization of conscience in 11-12 year olds. JOURNAL OF AMERICAN ACADEMY CHILD PSYCHIATRY, 24: 630-636.

Stilwell, B., Galvin, M. & Kopta, S. M. (1991). Conceptualization of conscience in normal children and adolescents, ages 5 to 17. JOURNAL OF THE AMERICAN ACADEMY OF CHILD AND ADOLESCENT PSYCHIATRY, 30, 16-21.

Stilwell, B., Galvin, M., Kopta, S.M. & Norton, J.A. (1994). Moral- emotional responsiveness: two domains of conscience functioning. JOURNAL OF THE AMERICAN ACADEMY OF CHILD AND ADOLESCENT PSYCHIATRY, 33, 1: 130-139.

Stilwell, B., Galvin, M., Kopta, S., and Padgett, R. (1996). Moral valuation: a third domain of conscience functioning. JOURNAL AMERICAN ACADEMY CHILD/ADOLESCENT PSYCHIATRY, 35, 2: 230-239.

Stilwell, B.M., Galvin, M.R., Kopta, M., Padgett, R.J. and Holt, J.W. Moralization of attachment: a fourth domain of conscience functioning. JOURNAL AMERICAN ACADEMY CHILD AND ADOLESCENT PSYCHIATRY, in press.

Thomas, L. (1993): Morality and psychological development. In: A COMPANION TO ETHICS (ed. P. Singer). Blackwell Publishers Ltd., Oxford, UK. pp. 464-475.

Williams, B. (1985): ETHICS AND THE LIMITS OF PHILOSOPHY. Harvard University Press, Cambridge, Mass

Wilson, J.Q. (1993) : THE MORAL SENSE. The Free Press, New York.

Wittgenstein, L. translated by D.F. Pears & B.F. McGuiness (1974): TRACTATUS LOGICO PHILOSOPHICUS, Humanities Press, Great Britain.

Wong, D. (1993): Relativism. In: A COMPANION TO ETHICS (ed. P. Singer). Blackwell Publishers Ltd., Oxford, UK. pp. 442-450.

PART TWO

{to be transcribed}

[Consultation from Drs. Stilwell, Kline & Bowman: Dr. Every Person]

ABSTRACT FOR PANEL DISCUSSION

The panel will consist of Barbara Stilwell, M. D. , moderator, Elizabeth Bowman, M.D. and Mark Kline, M.D., discussants. The panelists will have had an opportunity to familiarize themselves with the essential text of the presentation made in the preceding hour by Dr. Matthew R. Galvin, including the Case Vignette. In addition they will have been provided a copy of the Health Professional Student Conscience Interview, in its most current draft form, as well as a copy of the handout provided to the Grand Rounds participant-attendees (comprised of an annotated bibliography, a description of the conscience

domains in children and adolescents, and the table, reconstructed in the preceding hour, showing conscience domains, associated intrinsic values, virtues and corresponding moral philosophical traditions). Each panelist will have complete freedom to offer her/his critique of our Conscience Theory as interpreted and presented by Dr. Galvin. Each panelist will have an opportunity to stimulate and engage in discussion regarding what each views as important crises in the professional conscience of Dr. Every Person, the fictitious mental health professional in the case vignette, or other aspects of the development of professional conscience not captured by the vignette. However, principally, the panelists will engage themselves (and allow themselves to be engaged by the other Grand Rounds participant-attendees) in looking at the developmental process that psychiatry residents, psychology interns, psychiatric social work, nursing and other mental health professional students go through in seeking and accepting guidance while also moving towards fuller autonomy in forming their professional consciences. Implications of understanding the nature of conscience for medical/ mental health professional ethics will be considered.