Chapter 8 Offsetting Present Risks, Preempting Future Harms, and the Ethics of a 'New Normal'



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8.1 Introduction

Since the onset of the COVID-19 pandemic, we have witnessed several changes and shifts in our ordinary, everyday behaviour. In an effort to mitigate and tackle the risk of global spreading of the SARS-CoV-2 virus, governments, scientists, and various health organisations proposed adopting new safety precautions. For instance, working and schooling small children from home became the norm amongst those who had the option to do so. In addition, wearing a facemask to the supermarket or keeping a 1.5 m distance from one another when in public spaces suddenly became widespread in many parts of the world.

For most people, the idea of undertaking precautions like wearing a medical facemask unless one is in a hospital or of not being permitted to visit restaurants nor work in their workplace would have seemed incredible before. But suddenly, this was, and in some places continues to be, what many referred to as "the new normal". For instance, in implementing mandatory face masks as a national health policy, India's Union Government notified its citizens, saying, "we should

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incorporate it in our lives as a new normal". Similarly, in announcing the return of mandatory masks in public as a long-lasting social practice, the Governor of Connecticut, Ned Lamont, informed his fellow Americans that, "We are going to be getting back to normal; it will be a new normal".

While discussions of a new normal gained momentum during the COVID-19 pandemic, what exactly people mean when they speak and write about it is not always clear. Moreover, it is noteworthy that there are also various other cases that can be and that have sometimes been classified as being a new normal: for example, this can happen when new technologies are introduced (e.g. a new normal emerges in a world in which self-driving cars populate public streets) or when other changes occur (e.g. a new normal emerges in a world with drastic climate change). While there is an extensive discussion of pandemic ethics, and also independent discussions of related cases in the literature, the idea of exploring a range of different cases under the umbrella of "a new normal" at a general level remains nascent and under-explored.

Our aim in this chapter is to engage in preliminary groundwork for what we will call the "ethics of a new normal" more generally. We are interested in what different kinds of situations that can be viewed as involving a new normal have in common from an ethical point of view, and we will identify a number of key considerations that are likely to be relevant in most instances of what could be called the ethics of a new normal. We think it is useful not only to think about those different kinds of cases in isolation, but also in relation to each other, with an eye to what they have in common. This can be useful for engaging with or discussing a new normal that is already a reality – like the COVID-19 pandemic – or a new normal that we are already transitioning towards. It can also be useful when we discuss a new normal that we are likely to transition to – like a future with driverless cars or a future dealing with the problems associated with climate change.

Our discussion proceeds as follows. In Sect. 8.2, we offer a schematic definition of what we mean by "the ethics of a new normal" and explicate its relationship with familiar topics in the literature. Section 8.3 explores different examples of concrete ethical discussions that can be classified as instances of the ethics of a new normal. Section 8.4 identifies some morally relevant distinctions important for discussing the ethics of a new normal. This section provides a classification of such distinctions, which is summarized in a table at the end of the section. In Sect. 8.5, we discuss shortcomings of popular hardliner arguments for transitioning towards the new normal offered in the literature. Finally, we propose an alternative: drawing upon John Broome's discussion of offsetting climate harms, we discuss a general risk-offsetting principle as a plausible alternative for thinking about how to respond to a new normal. Section 8.6 concludes.

¹ https://www.livemint.com/news/india/face-masks-are-new-normal-incorporate-it-in-our-lives-centre-amid-third-covid-wave-fears-11626432848811.html (Accessed on September 19, 2021)

²https://www.rnz.co.nz/news/world/414437/covid-19-worldwide-cases-exceed-2-million-death-toll-crosses-136-600 (Accessed on September 19, 2021)

8.2 Outlining the "Ethics of a New Normal"

Addressing any ethical or political issues surrounding any so-called new normal must presuppose an account of what a new normal is or what it represents. For instance, in recent times of COVID-19, academic and public discussions mainly revolved around questions of whether and how our "new normal" ways of responding to pandemic risks should or could be our "new future" (e.g. Bramble, 2020). Little attention, however, is paid to the very idea of the "new normal" itself. What, for instance, makes a situation or a particular state of affairs a "new normal" in a morally and/or politically relevant sense? Or, to put it differently, when and why do certain change(s) in affairs indicate the advent or beginnings of an actual or potential new normal that deserves our attention?

While there is no definitive understanding of the notion of "a new normal", it appears to be common to use this phrase when some new risk has been introduced and new safety precautions are therefore called for. Jeff Clyde Corpuz (2021) notes that the first use of "a new normal" was likely during the time of the 2008 financial crisis. Back then, the term referred to the various impacts the crisis had on individuals and society at large, such as conditions of precariousness and long periods of social unrest. In current discussions of a new normal, many people seem to refer to the idea of a shift, change, or transition in an existing or established set of individual or structural risk-taking or risk-creating practice(s) or behaviour(s).

We will mostly be focusing on issues related to likely harms and other risks below, since that seems to be a common factor in many discussions of a new normal. But on the most general level, we will take it that "a new normal" refers to a situation or a state of affairs that is different relative to some temporal baseline. The difference in the state of affairs may track changes or shifts in our social, moral, legal, economic, epistemic, psychological, biological behaviour, practices, norms, or a combination of these. In each case it would be a "new normal" in light of one factor or set of factors that has either been introduced, removed, or modified in a way that impacts how we live our day-to-day lives, conduct our current affairs, or what we consider as normal. By "the ethics of a new normal", we mean any and all ethical questions having specifically to do with such factors that contribute to the existence of a new normal.

What we are calling the "ethics of the new normal" here is not often discussed in these general terms. But it is closely related to, and partly overlaps with, various other ongoing and well-established discussions within applied ethics and moral philosophy more generally. Here are some examples that we can briefly consider in order to situate what we are calling the ethics of a new normal in relation to other on-going debates. (In the next section, we will consider concrete examples of ongoing debates that we think are clear instances of the ethics of a new normal.)

First, there is the ethics of risk more generally (E.g., Hansson, 2003; Hayenhjelm & Wolff, 2012; Maheshwari, 2021). This is the discussion of how we should deal with risks and uncertainty in life, why it is bad to be exposed to risk, what is wrong with imposing risks on others, how much risk is acceptable in life, what safety precautions are ethically required in different parts of life, and so on. Such questions about the ethics of risk are highly relevant in any discussion of the ethics of a new normal. The reason for that is that a new normal can often be understood as a situation where one or more new risks or sources of uncertainty have been introduced into human life, which makes a difference to how we have reason to go about our everyday lives.

Second, there is the ethics of resilience (Cañizares et al., 2021). This is a set of ethical issues related to how resilience can or should be achieved in essential parts of human life. This is often discussed within engineering ethics. There is an important paradigm within engineering research, "resilience engineering", which is about how the outputs of engineering projects (bridges, socio-technological systems, and so on) can be made resilient against different kinds of pressures (Doorn, 2021). Resilience is also an important concept within discussions about health and how to protect the health of human beings and non-human animals, or perhaps even the health of whole ecosystems. The ethics of resilience is highly relevant to, but also partly different from, what we call the ethics of a new normal. Resilience is usually about maintaining something that already exists or maintaining something that is being created. In the ethics of a new normal, the main issue is dealing with new challenges that affect our day-to-day lives. Thus, matters related to resilience are central to the ethics of a new normal. But other questions are paramount as well: for example, whether to respond to new challenges to our everyday lives by creating new forms of safety precautions or design other forms of harm- or risk reduction strategies.

Third, one more thing – the last thing we will mention here – that comes to mind as partly overlapping with and certainly relevant for the ethics of a new normal is the debate about transitional justice (E.g. Teitel, 2000; Murphy, 2012). When academics and others discuss transitional justice, they usually talk about protecting human rights after some armed conflict, natural disaster, or other events that might raise questions about justice after a transition from one state of affairs to another. Such discussions can be seen as being about a new normal. Accordingly, we view transitional justice debates as being included in the general category of the ethics of a new normal. But we understand the ethics of a new normal to cover a wider range of issues than those very important ones that specifically have to do with human rights and justice that are part of transitional justice debates. We will now put forward a number of other examples of concrete topics and debates that we view as important instances of the ethics of a new normal.

Examples of Ethical Debates that Can Be Viewed as Part 8.3 of the Ethics of a New Normal

As noted above, our characterisation of a new normal is intended to be general and expansive to the effect that it allows us to situate various ongoing ethical debates about current, future, or potential new normal scenarios under the broader umbrella of "the ethics of a new normal". In this section we identify a number of discussions and specific contributions to practical ethics that can be viewed as being part of the ethics of a new normal. As we see things, it is often useful to compare ethical discussions that are going on in parallel, that might have interesting similarities, and that can therefore be interesting to discuss side-by-side under a general heading. Hence we see it as useful to consider whether different ongoing discussions in practical ethics can be viewed as fitting under the heading of the ethics of a new normal. Additionally, we think that there are cases where the term "a new normal" might not have been used explicitly but where it nevertheless makes sense to compare those cases with other cases that have explicitly been labeled as a new normal.

This holds, for instance, in the case of discussions of disruptive technologies that are on the horizon but are not yet widespread in society. Take the introduction of self-driving cars or artificially intelligent humanoid robots that may be on the horizon (Nyholm, 2020; Royakkers and van Est, 2015). These can also be seen as bringing about a new situation where there is a new key factor or set of factors that people need to consider when going about their day-to-day lives. When it comes to humanoid robots, philosophers have begun discussing whether a new normal involving such robots would require us to give certain rights to those robots or treat them with some degree of moral consideration. (Nyholm, 2020: Chap. 8) Consider next selfdriving cars. In recent years, there has been a lot of hype about the large-scale introduction of autonomous vehicles, also known as self-driving cars, into public traffic (Gurney, 2016). Both academic and public discussions are filled with speculation and anticipation of how things could or should be in light of changes in our routine driving practices if and when self-driving cars on our public roads becomes the new normal (e.g. Royakkers and van Est, 2015).

For instance, would we no longer need to avoid drinking alcohol before using a car? Would driving as a profession no longer exist? Or - to also bring up a muchdiscussed topic - how should these self-driving cars handle risky scenarios where accidents appear to be unavoidable? And who should be held responsible if and when a self-driving car injures or kills a human being? (Nyholm, 2018a; b). Being faced with such questions will soon, many think, not only be a hypothetical future scenario. It will instead be a new normal within the domain of traffic (Gogoll & Müller, 2020). The same can be said about many other technologies that are currently primarily part of visions of what the future will be like: e.g. our other justmentioned example of maximally humanlike robots with high degrees of artificial intelligence (e.g. Danaher, 2020; Schwitzgebel & Garza, 2020). We are not yet living in a world featuring such technologies. But before we know it, it might be the new normal.

Likewise, the developments related to climate change and the factors differentiating the modern world from previous times in human history are examples of new factors providing reasons to reflect on how we live our lives (Jamieson, 2014; Di Paola, 2017). Frequent very extreme weather conditions – such as hurricanes or tornados – and much higher average temperatures, and all of the impacts this will have on nature, are often discussed as things that future people will have to deal with as part of their everyday experience. It might soon become the new normal that temperatures are sweltering, that extreme weather changes become much more common, and that an increased number of places in the world will become uninhabitable for human beings and many non-human animals (Broome, 2012). This is another expected transition to a new normal that raises numerous pressing ethical questions about the ethical defensibility of our current ways of living and consumption patterns.

In two relatively recent books that are worth mentioning in this context – *Death and the Afterlife* (2011) and *Why Worry about Future Generations* (2018) – Samuel Scheffler's discussion of the relationship between current and future generations appears to fall under the ethics of a new normal. According to Scheffler, it matters to us more than we might realise whether or not there will be people around after we are gone. To illustrate this, one of the things Scheffler does is to ask his readers to imagine the prospects of Armageddon-like scenarios, wherein we realise that we are the last generation of people who will ever live (also c.f. Ord, 2020). The scenarios Scheffler discusses are inspired by science fiction. But his aim in using such scenarios is to try to get us to realise what matters to us in real life when it comes to our relation to the people who will exist – or perhaps not exist, depending on how things go – in the future, after we ourselves are dead.

In one scenario Scheffler lays out, a giant asteroid is travelling through space towards the planet Earth. It is clear that the collision between this asteroid and our planet will cause so much damage that human life on Earth will no longer be possible after the collision. Thus, the people in Scheffler's example face the "new normal" of realising that they are the last people who will live and that human life will end soon.

In a second scenario – inspired by P.G. James's novel *The Children of Men* – there is no asteroid travelling towards Earth that is about to suddenly kill everyone in a violent collision. However, human life will end for another reason. Everyone has become infertile, and nobody has conceived a child for the last 25 years. This universal infertility is not the result of anything anybody did. Moreover, people are otherwise healthy, and it seems that they will get to live out their full lifespan. But nobody will come after them since nobody is having any children. This is another "new normal" that Scheffler asks us to consider and react to (though he does not use the expression "new normal").

Scheffler's aim in putting these examples forward and asking his readers to react to them is to try to make us see what value we put – either explicitly or at least implicitly – on there being people who will live after we are gone, and who can carry on our projects, and who can value the sorts of things we value. The normal situation is that we safely assume that there will be people coming after us. But with

climate change and other existential threats to humanity, the new normal might become or already be that we cannot anymore simply take for granted that future generations will take over after we are gone. (Scheffler, 2011, 2018, see also Ord, 2020 and Nyholm, 2021).

Another striking instance of the ethics of a new normal appears in the book *Unfit* for the Future, wherein Ingmar Persson and Julian Savulescu (Persson & Savulescu, 2012) argue that we today face risks – including risks of what they call "ultimate harm", viz. potentially irreparable damage to the possibility of future human life on Earth – that our evolved human psychology has not been adapted to help us deal with. In comparing the circumstances in which human beings have lived during most of the history of our species with the circumstances of living in the modern world, Persson and Savulescu, in effect, argue that we seem to be part of a new normal whereby the modern world involves ethical challenges – related to existential risks and large-scale collective action problems – that our evolved human psychology is not ready for. Thus, we are, Persson and Savulescu argue, "unfit for the future" to an extent that raises urgent ethical questions about how to deal with or respond to these "new" aspects of the new normal.

We are bringing up this example – not only to give yet another example of something that could be classified as a case of the ethics of a new normal - but also to illustrate what counts as a new normal is a relative matter. Compared to the 150,000-200,000 years of the history of our species, life in the modern world is a unique situation for our human species. Most of human history so far took place in a very different kind of world, as described by Persson and Savulescu in their discussion. That is an extremely long-term perspective.

That situation described from this long-term perspective is one kind of new normal. It is a new normal in the grand scheme of things. But, by a new normal, we might also mean something much more abrupt than the transition from prehistoric times to the present. We might mean the transition between, say, everyday life as it was in 2019 before the COVID-19 pandemic and life as it came to be, in most of the world, thereafter, during, say, 2020 and 2021. For instance, the COVID-19 pandemic has recently introduced new factors that we have reason to consider when we decide how to live our everyday lives, namely, the presence of the Coronavirus and its dangers and risks (Bramble, 2020). The switch to wearing masks or keeping a 1.5 meter distance to reduce one's potential exposure to risk, for instance, marked an instantaneous change in our social behaviour and practice.

As we have just seen, there is a range of different discussions that can be seen as all being part of the overall topic of the ethics of a new normal. We are interested in what different cases of an ethics of a new normal have in common. And we are here looking at these kinds of cases from a zoomed-out perspective to see whether there are any general distinctions, considerations, or principles that are likely to be relevant in most or all of these cases. What we are calling the "ethics of the new normal" here is not often discussed in these general terms, as far as we know. But as we have just seen, various ongoing and well-established discussions within applied ethics and moral philosophy more generally are clear instances where what is being the discussed is the ethics of a new normal.

8.4 Some Key Distinctions

To analyse any given situation that is a new normal or likely to become the new normal, further clarification regarding the scope, the depth, and the breadth of the ethical questions that may arise within its domain is required. The exact details of different situations that can be labeled a new normal will differ, but it is also possible to reflect on ethically relevant features that many, if not most, situations that can be labeled a new normal might have in common. To this end, we will now note some basic, general distinctions that are likely to be relevant in most or all of these cases.³

First, we distinguish whether everyone currently existing or who will exist, or only some subset of this population is affected by a new normal. This distinction has two applications: first, we can ask who has reason to change their ways of going about their everyday lives because of the new normal. And second, we can ask whose lives are directly impacted by any good or harmful effects of the new normal. Sometimes, the answers to those questions can refer to one and the same group. But there might only be a partial overlap. Or perhaps they are two separate groups.

Consider climate change as an example. Those who live now and might be concerned about how their lifestyles might adversely impact the climate may feel that they have reason to change their day-to-day behaviour to lessen the harmful effects climate change might have on the lives of people who will live after we are all dead. Or we might have a case where the people affected by the new normal also have reason to change their normal habits. This happened for most people in the world during the COVID-19 pandemic. Everyone faced the risk of getting the virus, and everyone, or almost everyone, had reason to change their day-to-day habits.

With climate change, by contrast, it might first be the case that only some are primarily affected. For example, for the people living in the Maldives, climate change will soon have an extreme impact since the island nation will most likely end up completely underwater within 75 years or so. ⁴ Later on, when climate change becomes more extreme, it might dramatically affect all people worldwide.

Relatedly, we can draw a distinction between whether life, in general, is affected by the new normal or whether there is primarily one part of life that might be affected by a new normal. So, for example, with something like climate change or a pandemic, it may be that life in general – or almost every aspect of life – is impacted by the new normal. But when it comes to introducing some new technology, it may be that it is primarily one specific part of life that is affected.

Of course, there might be ripple or cascading effects and repercussions on other aspects of life, but the central part of life where there is a new normal might be some clearly definable part of life. If fully self-driving cars are introduced as an option, we can use them on the road, for example, and the part of life that might be regarded as a new normal is primarily the domain of traffic. This might be a case where there

³Note that this list of distinctions is not exhaustive.

⁴ https://www.worldbank.org/en/news/feature/2010/04/06/climate-change-in-the-maldives (Accessed on September 19, 2021)

are various further effects and repercussions - if we are to believe some of the speculations about what will happen when fully self-driving cars become widespread! – but it is most obviously traffic where there is a new normal (Royakkers and van Est. 2015).

Another distinction that is relevant to draw is between whether the new normal is likely to be a transitory phase or whether the new normal is something more permanent. For example, a pandemic might mean a new normal where life is turned upside-down for a while – perhaps even a long time. But in the end, things might "go back to normal" in the sense that they will resemble how things were before the pandemic again. In contrast, when climate change becomes extreme, it might be that there is no turning back; the new normal might be here to stay. This overlaps with the distinction between whether some new normal is reversible or whether it is irreversible.

For instance, in case of an ongoing pandemic, unless a vaccine is invented with an extremely high efficacy or other ways of dealing with a pandemic are worked out, life in a world with a novel virus might irreversibly be a new normal, where we cannot go back to how things were before. But with the right technologies and other ways of tackling the multiple problems of this pandemic, it might be that the new normal is reversible and that there is a way of going back to how things were before. With something like climate change caused by large-scale pollution and resource depletion, in contrast, the problem might be irreversible, and the new normal might be there to stay. It should be noted, though, that what is apparently irreversible might not be de facto irreversible. Even something like climate change might, according to some technology optimists, be a reversible problem.⁵

This points to a closely related distinction of whether a new normal results from human agency or some natural cause outside of human control. In other words, is it anybody's fault - our own fault perhaps - that something has become the new normal or might soon become the new normal? Was it because of something that some individual or group of individuals - or some big collective of people - did? Or did the new normal come about because of some other reason? For example, during the COVID-19 pandemic, there was widespread speculation over whether the virus was naturally occurring or was created in a laboratory by human beings. Similarly, whether climate change depends on our human lifestyles or primarily on other causes is something that animates those concerned about climate change.

In general, whether a new normal is the result of human agency or not matters greatly to what ethical categories of assessment are appropriate to use in the evaluation of options and when we think about how it is appropriate to respond to the new normal. So, for example, should we think in terms of whether people living now have duties of goodness or duties of justice towards future generations, to use two expressions from John Broome's (2012) book Climate Matters: Ethics in a Warming World? Or should we instead think in Shefflerian terms of whether we have reasons

⁵ See, for instance, the discussion about geo-engineering in Scott (2012).

New normal	For some		For everyone	
(Examples)	In limited domains of life:	In all aspects of life:	In limited domains of life:	In all aspects of life:
	For example: People who drive cars in a new normal that involves having the option of using fully self-driving cars	For example: Climate change in the short-run (e.g., for people living in the Maldives)	For example: What is involved in appearing in specific public spaces during a pandemic	For example: A pandemic is so severe that new safety precautions have to be taken in all parts of life
Reversibility?	The new normal could involve irreversible damage to some or all populated regions. Example: Climate-change induced flooding, extinction risk (irreversible for all)			
Repeatability?	The new normal could either be a one-off incident or a repeatable one.			
Reparability?	The new normal could or could not involve harm that can be redressed, or offered restitution for, to all or some affected particles.			
Responsibility?	The new normal could be due to an individual's or a group's fault or responsibility.			

Table 8.1 Key distinctions and concepts within the ethics of a new normal

to feel some form of despair, resignation, or existential sense of meaninglessness when we think of worrying aspects of a new normal? (Nyholm, 2021).

There are four broad classes of cases that seem to call for different forms of normative assessment. In one kind of case, the new normal is nobody's fault, and it might be unclear whether there is anything we can do about it. By contrast, secondly, there can also be cases in which the new normal is nobody's fault, but where there is something that can be done. Thirdly, there are cases in which the new normal is somebody's fault and where something can be done about it. Fourth and lastly, there is, of course, also the grimmer type of case where the new normal is somebody's fault – either some individual or some group's fault – but where there is nothing that anybody can do to deal with whatever problems or risks are involved in the new normal. These four kinds of scenarios differ with respect to what normative duties or appropriate responses we should associate them with.

We can summarize some of the above-considered distinctions in a matrix as follows (Table 8.1):

8.5 The Hardliner Vs the Offsetting Approach to the Ethics of a New Normal

As noted above, in his earlier-mentioned book, Broome (2012) distinguishes between duties of goodness (or duties of benevolence), on the one hand, and duties of justice, on the other hand. If, for example, there is something we can do to deal with some problem associated with a new normal, but it is nobody's fault that there

is this new normal (e.g. there is a naturally occurring virus), it might be that our duties to act are not associated with rectifying some injustice but that our ethical duties are instead related to what it would be good or benevolent to do. By contrast, if some problem (e.g. the issues related to human-created climate change) is our fault, we might have what Broome calls duties of justice to change the way we live our lives to try to counteract the problem. Lastly, suppose a problem associated with a new normal is our fault, but that nothing can be done about it. (According to some people's estimates, this might soon be the case in relation to human-created climate change. (Persson & Savulescu, 2012)) In that case, the normatively appropriate response might be deep regret or a realisation that what we have done is the opposite of something positively meaningful (Nyholm, 2021).

In most cases, the new factor or set of factors that creates a new normal is some risk or set of risks. Or it might be some new technology that can be used to deal with risks in a novel way. In each type of case, risks and safety considerations are central to what helps to define something as a new normal. For example, the new normal related to the COVID-19 pandemic had to do with the new risks introduced by the Coronavirus. Similarly, the new normal pertaining to climate change has to do with new risks of great harm related to living in a different type of climate. And, to give one more example, new technologies (such as fully self-driving cars) might be claimed to have as their primary benefit to make some activity (in this case, driving) safer (Gurney, 2016). So, the duties of goodness and duties of justice related to a new normal are typically going to be duties of goodness or justice of how to respond to risks. The last thing we will do is, therefore, to briefly discuss the ethics of how to deal with risks and risk management concerning a new normal.

Notably, when a new normal comes about or is about to come about, and this involves introducing new risks or new ways of mitigating risks, this will often lead some to suggest what we will call a hardline approach. For example, in a recent article about the COVID-19 pandemic, Peter Singer (2021) argues that there is an obligation that applies to everyone that we should all get vaccinated. This should not, as some think, be a matter of personal choice.⁶ In discussing this issue, Singer makes a comparison between compulsory COVID-19 vaccinations and compulsory seat-belt use. We should have the former, just like we should have the latter, and for similar reasons, Singer argues. Call this a hardliner approach.

This way of arguing – i.e., approaching the ethics of risks by comparing one type of safety precaution with another – is common in the specific discussions we have identified above as being instances of the ethics of a new normal (cf. Giubilini & Savulescu, 2019). It is common in the ethics of dealing with the COVID-19

⁶A member of the United States archery team that competed in the Tokyo 2020 Olympics – Brady Ellison - took that view, decided not to get vaccinated, and claimed that such a decision is "one hundred percent a personal choice," and that "anyone that says otherwise is taking away people's freedoms." In arguing for compulsory vaccinations, Singer was reacting to such views - even directly quoting the athlete Ellison disapprovingly – and he argues that a view like Ellison's falsely makes it appear as if the only person affected by their choice not to get vaccinated is the person him or herself.

pandemic, impending climate change, and the introduction of new technologies, such as fully self-driving cars.

For example, Jan Gogoll and Julian Müller (Gogoll & Müller, 2020) discuss the choice between fully self-driving cars and regular cars in a new normal in which we would face such a choice. They argue that if self-driving cars would be safer than standard cars, then everyone should be made to use self-driving vehicles rather than regular cars. To make this case, they appeal to an argument that Jason Brennan (2018) has put forward in the context of vaccination ethics for why, according to him, even libertarians can be in favour of compulsory vaccinations. The general idea, borrowed from Sven Ove Hansson, is that imposing risks on others is only permissible if it is part of a practice that works to everyone's benefit and there is no alternative practice that works better to everyone's benefit (Hansson, 2003).

In this hardliner picture, something like the practice of mask-wearing, for instance, as a way to reduce one's chances of imposing risks on others involves mandatory transitioning from an "old normal", where wearing masks was not part of a risk-mitigating or risk-reducing socially beneficial activity, to a "new normal", where this is the case. The introduction of autonomous self-driving cars deemed safer than ordinary cars may involve a similar type of transition. It might involve transitioning from the "old normal", where driving ordinary cars is considered a socially beneficial activity that involves mutually advantageous risk-taking for members of a society, to a "new normal", where this is the case only for autonomous self-driving cars.

These new ways may entirely override, replace, or supplant existing safety norms and practices of taking precautionary and preventative actions (or omissions). If we consider such transitions only with an eye to the aim of promoting safety, and we set other considerations aside, moving to the safer alternative will often seem like the right thing to do. However, this idea of mandatorily transitioning into a new normal by changing one's behaviour in response to new risks is not without controversies, for it overlooks certain feasibility considerations. For instance, in many places, people either simply failed to afford taking precautionary measures like wearing expensive masks because of lack of financial resources or failed to observe recommended actions like maintaining distance in public spaces was simply not physically feasible due to shortage of space.

What would be another approach? One type of approach we have in effect already considered: namely, the idea that it should be a personal choice whether one wants to take some form of safety precaution in response to the risks associated with some new type of situation. This was the approach that the Olympic archer Brady Ellison advocated concerning COVID-19 vaccines, as mentioned in footnote 6 (Singer, 2021). It is also an approach that some have voiced their approval of when it comes to choosing between fully self-driving cars and manually driven cars.

Something called the "human driving association" has published a "human driving manifesto", in which they argue that people's freedom to drive regular cars should not be taken away if fully self-driving cars are introduced into society (Roy, 2018). This organisation is, they say, "pro steering wheel"; they do not want to be forced to drive self-driving cars, even if they would turn out to be safer than regular

cars. Interestingly, however, the rest of the "human driving manifesto" signals a willingness to advocate extra safety precautions for those who wish to continue driving regular cars even as the option of what would supposedly be safer selfdriving cars is introduced. Thus, for example, the members of the human driving association signal a willingness to make the tests one has to pass to get a driver's license much more demanding so that only those who drive in a very safe way can get a license.

They also show openness to other forms of technological safety precautions, such as lane-keeping assistance technologies. And one can also imagine things such as alcohol locks and speed regulation technologies that could help make manual driving safer than it might be at present. These would be ways of compensating for the additional risks associated with regular cars to make the safety level of manual driving more like that of self-driving cars (Nyholm & Smids, 2020).

This is reminiscent of an approach that Broome (2012) suggests regarding alternative ways of dealing with our carbon footprint and climate change. Broome does not argue against the hardliner approach of doing things that would lessen one's carbon footprint, e.g., no longer travelling in aeroplanes, driving less, or whatever. But he does argue that there is an equally defensible alternative. Broome argues that we can compensate for or "offset" our carbon footprint and that this can be equally acceptable to minimising our carbon footprint.

How could one offset one's carbon footprint? Broome discusses options such as planting trees, paying some form of climate tax that could be used to compensate people of the future, or – and this is an exciting idea! – buying environmentally friendly stoves for people in communities where they cook with environmentally unfriendly stoves. If we do these kinds of things that help to neutralise our impact – if we put back as much as we take away - this is equally good as trying to lessen or minimise our carbon footprint, Broome argues.

A more general principle along these lines could be something like the following: when a new normal comes about, and there is some new option that helps to counteract the risks associated with the new normal, we should either go for this option or, alternatively, make use of other safety precautions that could help to offset the risks we create by not making use of that seemingly safest option. Call this the risk-offsetting principle (Cf. Nyholm, in press).

Suppose somebody does not wish to be vaccinated against COVID-19, or that they do not want to wear a facemask even though that is deemed to be an efficient safety precaution. In theory, they could potentially get away with this from an ethical point of view if they took some other form of safety precaution. For example, they could get away with it if they consistently maintained a safe distance (over one and a half meters) between themselves and other people. Of course, in practice, this will be hard to do for most people, but in theory it could be a way of offsetting the risks for others that are created by not getting vaccinated or not wearing a facemask.

Or suppose self-driving cars indeed become safer than regular cars, but somebody wants to continue driving a manually driven car. In that case, they could potentially get away with this from an ethical point of view if they took added safety precautions (alcohol locks, speed limiting technologies, lane-keeping assistance technologies, or whatever) that would help to offset the risks associated with driving a regular car rather than using a self-driving car. These kinds of choices – either to use the newer, safer option or to use additional safety precautions when going for some other, less safe option – are likely to arise in many situations involving a new normal when some new risk or some new form of safety precaution is introduced into some part of life. Accordingly, we think that a general principle such as the one just sketched is likely to be relevant in most cases we are dealing with the ethics of a new normal.

8.6 Concluding Remarks

As noted above, when the COVID-19 pandemic was at its height, and people were forced to take various forms of safety precautions in their day-to-day lives that previously could not have been imagined (wearing facemasks, working from home, not going to bars and restaurants, and so on), some started speaking about a "new normal". As we have noted above, ethical discussions about how we might need to change our behaviour in response to a new situation are not limited to the case of a pandemic. Other forms of development can also create a new normal, either concerning life in general or only in some specific domain. And similar ethical questions about how we should change our everyday behaviour arise then as well. For example, climate change is increasingly putting pressure on whether our day-to-day ways of living in the modern world are acceptable. Or if a new technology (e.g., fully self-driving cars) is introduced into society and functions as a game-changer in terms of risks and safety precautions, this is also part of the ethics of a new normal.

In this chapter, we have zoomed out to a general level and considered the very idea of a new normal and reflected on what broad ethical distinctions, considerations, and principles might be worth considering in most cases where we are facing an ethics of a new normal. Our discussion above is by no means a complete account of how we should approach the ethics of a new normal. It is a sketch of some of the considerations, distinctions, and principles that seem like they will be relevant in most discussions of this sort. More work is needed. We hope that our remarks above might stimulate others to zoom out to the more general level and ask what different cases of a new normal might have in common from an ethical point of view.⁷

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