

## *Classification and Normativity: Some Thoughts on Different Ways of Carving Up the Field of Bioethics*

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Bioethics is, as is moral philosophy in general, a field spanning a range of different philosophical approaches, normative standpoints, methods and styles of analysis, metaphysics, and ontologies. In discussing bioethics, it is often seen as useful to introduce some kind of order on the field by categorizing individual philosophers or specific arguments into a relatively small number of categories. Such categorization or classification has several functions. It may help to show the relationship between basic assumptions and specific arguments or it may be used argumentatively by arguing not against a single philosopher or her arguments but against the category to which she or they belong or are claimed to belong. In this way, whole lines of argument can be disposed of in one fell swoop and whole groups of philosophers dismissed by showing that they belong to some category that can, in some way, be discounted because it is fallacious. Or, conversely, lines of arguments and groups of philosophers can be celebrated and appropriated as support for yet new arguments.

This paper analyzes and evaluates different ways of performing this categorization and takes its point of departure in Matti Häyry's account of a "non-confrontational notion of rationality" in his recent book *Rationality and the Genetic Challenge*.<sup>1</sup> Häyry's project in the book can be seen as a project opposed to what Sterba calls the "warmaking model of doing philosophy." A model of philosophy that Sterba describes in the following way:

I was once asked by a well-known philosopher why I talked to libertarians. At the time, I was dumbstruck by the question, but now I believe that it reflects the dominant way that philosophy is being done these days, and may be even the dominant way that philosophy has always been done. It sees philosophers as belonging to different groups within which there can be a significant degree of sympathetic understanding but between which there can only be hostile relations, a virtual state of war. If you believe this is the case, then there really is a question about whether you should talk to your philosophical enemies. You may perchance say something that indicates certain problems with your own philosophical view, which may in turn be used against you, and, as a result, you may lose an important philosophical battle and your reputation may decline accordingly.<sup>2</sup>

Häyry describes the nonconfrontational notion of rationality in the following way:

A decision is rational insofar as it is based on beliefs that form a coherent whole and are consistent with how things are in the world; and it is

aimed at optimising the immediate or long-term impacts on entities that matter.<sup>3</sup>

Based on this account, Häyry then goes on to classify three main rationalities that he ascribes to six prominent participants in the contemporary bioethics debate. Each of the six has his own “sub-rationality,” although two of the six actually share the same sub-rationality. He classifies the rationalities on the basis of five criteria or questions:

- 1) What level of coherence is required?
- 2) How are things in the world?
- 3) How should impacts be optimized?
- 4) What entities matter?
- 5) What makes decisions moral?

This gives rise to Häyry’s Table 2.1, which is reproduced here for the readers’ convenience.

It is almost certain that some or perhaps all of the people categorized will object to some aspects of Häyry’s explication and categorization of their philosophical commitments in relation to these five criteria, but for present purposes, such objections are beside the point. The question we are trying to answer here is not whether Häyry has got the individual categorizations right, but whether his scheme is helpful and illuminating and how it compares to other classification schemes suggested in the literature.

The other schemes that will be investigated are as follows:

- 1) W. D. Ross’s right–good classification
- 2) Roger Brownsword’s bioethical triangle
- 3) “The standard bioethics teaching scheme”
- 4) The action/outcome/actor scheme.

These four do not exhaust the contemporary universe of classification schemes for moral philosophy or bioethics—no single paper could do that—but they have

**Table 2.1** Six rationalities

	What level of coherence is required?	How are things in the world?	How should impacts be optimised?	What entities matter?	What makes decisions moral?
Glover	High	Scientific	By maximising and minimising	Persons and their lives worth living	Regard for others
Harris Kass	High High	Scientific Spiritual	By respecting humanity’s continuity	Traditions and their preservation	Disregard for individual concerns
Sandel Habermas	High High	Traditional Scientific and moral	By communication and negotiation	Principles and their acceptability	Disregard for contingent concerns
Green	High	Scientific			

been chosen deliberately because (1) they are widely used and referred to, and (2) they provide a set of useful contrasts with Häyry's scheme.

But how do we compare classification schemes if we want to show not only how they carve up the field in different ways but also to show which one is most useful in a specific context? A classification scheme for bioethics is not a classification scheme of natural kinds and therefore does not "carve nature at its joints." When we are discussing usefulness, we are therefore primarily discussing practical usefulness and not merely accurate, precise, and correct classification.

A classification scheme can be used in many contexts, and usefulness is, at least to some extent, context specific. For someone interested in the philosophical history of bioethics, a scheme might, for instance, be useful if it allowed us to easily trace the philosophical pedigree of important contributors to the field. In the following, I will, however, focus on questions concerning how a classificatory scheme can be useful to participants in, or (contemporary) observers of, current bioethical debates.

Let us first focus on one particular class of observer, the political or administrative decisionmaker who has to make policy decisions in an area recognized by society as being ethically contentious. What kind of classification of bioethics would be useful to such a decisionmaker? One core consideration in decisionmaking processes is that all relevant arguments have been considered and all relevant voices heard. An accusation that a set of relevant considerations have been deliberately excluded or negligently overlooked is often a powerful critique of a policymaking process. A classification that maps out the ethical terrain and classifies arguments or positions into a relatively small set of categories can be of great help to the decisionmaker by (1) providing guidance as to what evidence should be studied or what experts called during the process and (2) providing a defense if the process is later criticized for being parochial.

For the decisionmaker, it will also be useful if the classification can explain (or at least seem to explain) why some bioethical questions seem to be extraordinarily difficult to resolve or, to put it differently, why reasonable people seem to be unable to reach reasonable agreement. If it can make such disagreements intelligible by pointing to some strong underlying commitment, it will help the decisionmaker to understand exactly what the choice is that has to be made.

For the bioethicists who participate in the debate, a classification scheme can also be useful, and some of the usefulness tracks the usefulness for the decisionmaker. A classification scheme can also be rhetorically useful if it allows one to label one's opponents and their argument with some negative label. But it can also have more "legitimate" usefulness. Bioethical argument about specific topics is often radically enthymematic, with a large number of hidden normative, empirical, and ontological premises. This entails that the validity and soundness of the argument can often only be assessed if these premises are filled (or at least sketched) in. If the philosopher in question has a copious prior production, we may be able to do this from his or her earlier writings, but if not, we have to find some other method. One reasonable way of doing this filling in, which is at least partly congruent with the principle of charity, is by reference to standard premises used by philosophers belonging to the same class of philosophers as the philosopher in question. But to do that we need a reasonable classification scheme that carves up the field according to important philosophical differences

and that only puts people in the same category if they are really similar in their commitments.

We can summarize this discussion of the usefulness of bioethical classification schemes in the following five pointers to usefulness (calling them criteria would be too ambitious). A classification scheme is likely to be useful if it follows these pointers:

- 1) It makes something (important) explicit that is often or always implicit
- 2) It helps in spotting similarities and differences between arguments, positions, or philosophers and in this way helps in supplying hidden premises
- 3) It helps in explaining why some arguments are difficult to resolve
- 4) It makes irresolvable disagreements intelligible by pointing to underlying commitments
- 5) It helps decisionmakers to say whether most relevant arguments have been considered in the decisionmaking processes.

Two further desiderata are that the number of categories in the scheme should be manageable and that the way the field is carved up should have some logical structure.

### **W. D. Ross and the Right–Good Distinction**

In his classical work *The Right and the Good*, first published in 1930, W. D. Ross discussed the relation between the rightness of action and the goodness of outcomes and argued that the then prevalent forms of utilitarianism could not be right because rightness of action cannot be reduced to the goodness of outcomes.<sup>4</sup> This leads to a position where “The Right” is an ethically more basic notion than “The Good.” Ross famously argued that there are at least three different intentions that can make an action morally right:

If “morally good” means what I have taken it to mean, it seems that besides (1) conscientious action two other kinds of action are morally good; and these too owe their goodness to the nature of the desire they spring from. These are (2) action springing from the desire to bring into being something good, and (3) action springing from the desire to produce some pleasure, or prevent some pain, for another being.

Under (2) I would include actions in which we are aiming at improving our own character or that of another, without thinking of this as a duty. And believing as I do that a certain state of our intellectual nature also is good, I would include actions in which we are aiming at improving our own intellectual condition or that of others.<sup>5</sup>

For Ross, there is a moral hierarchy of intentions with conscientious intention, that is, the intention to do one’s duty on the basis that it is one’s duty being the most important and the two consequence-based intentions being progressively less important. The specifics of Ross’s moral philosophy need not detain us here, but it gives rise to a more general scheme of classification in which ethical theories or positions can be categorized according to whether they take “The Right” or “The Good” as primary. Deontological theories are the most prominent type of theory in the first category, whereas the second category encompasses utilitarian and other broadly consequentialist theories (we will here not enter the recent debate about whether utilitarian theories are really consequentialist).

The value of Ross's classification is mainly analytical. When we know in which class an ethical position falls we know something about its basic structure and most basic assumptions. But the classification does not really help us with the specifics of theories or arguments in any of the two categories. Disagreements about, for instance, elective abortion are not usually based on disagreements on the primacy of the right or the good, but much more often on disagreements concerning the moral value and importance of the fetus or the balancing of rights and interests between the fetus and the mother.

Ross's scheme thus satisfies one of the pointers for usefulness by making a basic assumption explicit, but it fails on the other pointers.

### **The Bioethical Triangle**

The prominent British legal scholar and regulatory theorist Roger Brownsword has argued that the modern bioethical debate can be seen as proceeding from three different perspectives in a bioethical triangle.<sup>6</sup>

1. Utilitarian
2. Rights-led
3. Dignitarian.

He argues that a commitment to human dignity underlies both the rights-led and dignitarian perspectives, but that this commitment is cashed out in different ways in the two perspectives. The bioethical triangle emerges from an underlying, more basic matrix that in some ways corresponds to Ross's classification that we have discussed above. Here are Brownsword's own words:

The basic matrix—the matrix that sets the mould for ethical debates— involves three essential forms, namely goal-orientated (consequentialism), rights-based, and duty-based forms. It follows that the form of an ethical argument will either prioritize some end-state goals or it will start with a declaration of rights or a declaration of duties.

Each form within the matrix is a mould or a shell, open to substantive articulation in many different ways: different goals, different rights, and different duties may be specified.

Nevertheless, in principle, the basic pattern of ethical debate, whatever the particular technological focus ... is governed by this matrix.

Although, in principle, the matrix sets the pattern, in practice, it does not follow that the matrix is always fully expressed in debates about the ethics of new technologies. Often, we find only a two-sided debate with utilitarian cost/benefit calculations being set against human rights considerations. ...

By contrast, in relation to debates concerning the ethics of modern biotechnology, we have a three-way articulation of the matrix, the key substantive positions being utilitarian, human rights, and dignitarian. Here, in this distinctive bioethical triangle, we find the dignitarian alliance taking issue with both utilitarians and human rights advocates. Whilst the latter can sometimes find a common position, it is much more difficult to reach an accommodation with the dignitarians. For, according to the dignitarian ethic, some technological applications are, quite simply, categorically and non-negotiably unacceptable.

In this sense, of the three ethical perspectives, it is only the dignitarian view that is genuinely "red light."

Somewhat confusingly, the idea of human dignity underlies both the human rights and the dignitarian view. However, once this double take is identified, it is easier to see which version of human dignity is being contended for or presupposed. Moreover, with the bioethical triangle as our reference map, we can track and locate the positions taken on particular issues such as the use of human embryos as research tools or the recognition of proprietary rights over removed body parts and tissues.<sup>7</sup>

The main audience for Brownsword's bioethical triangle is not bioethicists or moral philosophers but decisionmakers involved in designing regulation. For them, the triangle is valuable because it (1) helps them to understand why ethical disagreements may not be resolvable, (2) identifies a limited set of basic commitments that makes the disagreement intelligible, and (3) maps the field for purposes of decisionmaking processes.

But the scheme is not unproblematic. It is first unclear whether it is exhaustive. Is it really true that there are only these three main positions in the debate or that only these three positions are relevant for decisionmaking? This would, I suspect, be strongly contested by some feminists or care ethicists in relation to reproductive technologies. Second, the classification is solely based on identifying three different sets of normative commitments, but are there not other differences in commitments that may also lead to disagreement about normative judgments?

### **The Standard Bioethics Teaching Scheme**

By the standard bioethics teaching scheme of classification we will understand something like the following, which essentially attempts to carve up the field according to the schools of moral philosophy:

1. Consequentialism
2. Deontology
3. Communitarianism
4. Virtue ethics
5. Feminist ethics
6. Care ethics
7. And so forth.

I call this the standard scheme because it is the scheme that underlies many textbooks in bioethics that are written with philosophers as the main target audience.<sup>8</sup> The purpose of the scheme is thus partly didactic, partly analytic. It is intended to point to important differences in ethical theory or commitments that will help students in fully appreciating the differences between the positions or schools of thought.

An initial problem with this scheme is that at least some of the categories overlap. It is, for instance, possible to fall within the category of feminist ethics and at the same time to belong to one of the other categories. A related problem is that there is discussion concerning whether some categories should be subsumed by other categories, for example, whether care ethics should be subsumed by either feminist ethics or virtue ethics. The classification is thus neither exclusive nor exhaustive. But these formal problems, even if insurmountable, do not show that the classification cannot be useful. They do, however, limit the usefulness of

the scheme for decisionmakers who may want reasonable reassurance that they have exhausted the field of relevant positions and/or experts.

A more important problem is that the scheme lacks an underlying logical structure.

### **The Action/Outcome/Actor Scheme**

The final scheme to look at here is the action/outcome/actor scheme. According to this scheme, we should categorize moral theories according to which type of moral judgment they see as basic, that is, whether the morality of actions, of outcomes, or of actors is most basic. This roughly corresponds to deontological, consequentialist, and virtue ethics positions.

But the main value of this scheme may not be as a classification tool but as a tool for moral criticism. There may be a tendency within a theory or school of thought that takes a certain view of what is most basic to neglect the other aspects in this triad. It is, however, arguable that any moral theory needs to have a carefully worked out account of what counts as a good action, a good outcome, and a good actor and a carefully worked out account of the relationship between them. Even if you take one of these to be basic, it does not exhaust the field of moral consideration. We need, for instance, to know not only which single acts count as evil, but also which persons should count as evil.

### **Häyry versus the Rest**

We are now in a position to compare Matti Häyry's classification scheme with the other schemes that we have investigated. What is the purpose of Häyry's scheme; is it purely analytical, explanatory, predictive, didactic, corrective, or something else? When comparing it to the other schemes we have analyzed it is in many ways closest to Brownsword's bioethical triangle, not in structure but in purpose. Brownsword's triangle is intended to help policymakers to understand the, to them probably mysterious, fact that ethical disagreements are seemingly insoluble. And it does so by pointing to basic and nonnegotiable commitments at each corner of the triangle (i.e., normative commitments to utility, rights, and dignity, respectively). Similarly, Häyry's scheme helps us to understand ethical disagreement by pointing to otherwise often implicit commitments of protagonists in the debate, and it helps us to see that each of the positions is potentially rational.

One obvious difference between the schemes is that, whereas all the schemes use differences in ethical theory, framework, or assumptions as a criterion for classification, only Häyry's scheme explicitly uses criteria that might be considered metaphysical or ontological ("How are things in the world?" and "What entities matter?"). That is not to say that explicit discussions about such matters are absent from bioethics. There is, for instance, a lively debate concerning the ontology of human relationships, mainly within feminist and care ethics. But such ontological issues are not explicitly reflected in the classification schemes, and they are, furthermore, often only implicit in that part of the literature that is directed at analyzing specific ethical issues or problems.

Does this difference make Häyry's scheme better or more useful? One of the pointers to usefulness developed above is the ability of a classification scheme to make the implicit explicit. And given that metaphysical and ontological

commitments are often implicit in bioethics arguments, Häyry's scheme does perform a useful function insofar as it makes these commitments explicit.

Another advantage of Häyry's scheme is that it takes into account some of the differences in bioethical epistemology and methodology. The more traditional classifications that we have looked at often classify "the finished product," that is, the theory that comes out of the bioethical deliberations, but Häyry's scheme enables us to point to and use information about the background process of theory building for our work of classification. This may enable us to see more clearly why certain disagreements occur between philosophers who proceed from fairly similar starting points. It should also help us in completing enthymematic arguments.

But Häyry's scheme is not without problems. Two reasons for its superior usefulness are that it uses more criteria than the other schemes and that it therefore highlights and foregrounds more issues and differences, but having five criteria means that there are  $2^5 = 32$  different possible categories or even more if more than two options are possible for each criterion. Three options per criterion would lead to  $3^5 = 243$  categories, and given the entries in Table 2.1 in Häyry's book there might conceivably be more than three options for some of the criteria. This means that the scheme presented in Häyry's book is only a fragment of a much larger set of categories. It may well be the case that many of them are empty or of no interest to the moral philosopher or decisionmaker, but to decide that will take considerable further investigation.

Proponents of other schemes could also object that just as Häyry's scheme illuminates and foregrounds certain issues, it hides and potentially obscures others that are equally important. Where are, for instance, the basic value commitments of the bioethical triangle or the relational focus of care ethics?

If these criticisms are taken seriously, we may be on the way to a scheme with even more criteria and therefore more categories. Such a scheme could quickly become unworkable and lose its usefulness for anything else than mere classification.

### Where Do We Go from Here?

This paper has argued that the classification scheme for bioethical positions used in Matti Häyry's book *Rationality and the Genetic Challenge* does have several advantages in comparison to four other classification schemes commonly used. It has also argued that Häyry's scheme is not perfect. But then, it would be strange to expect perfection because the scheme is developed with a particular project in mind, and analyzing it in isolation from that project as we have done here is problematic in many ways. Nevertheless, it is relevant to ask what more general points we can derive from the analysis.

The main difference between Häyry's scheme and the other schemes we have analyzed is the way in which Häyry's scheme includes the theory-making process and basic nonnormative epistemologic, ontologic, and metaphysical commitments as important elements in distinguishing positions. As argued above, such information is important for understanding where the real differences between positions are.

Future work on classification in bioethics, or just casual use of categories in bioethics argument, needs to follow Häyry's lead in this respect, probably not by



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adding yet more questions or criteria and thereby more categories, but by highlighting specific, important nonnormative commitments that divide participants in the debate.

One possible way this could be developed is to look more carefully at the implicit anthropology of bioethics. What assumptions are made about the “nature” of human beings or other moral actors, and what implications do these assumptions have for our ideas about what is good for humans and what should, ethically, be pursued?

### **Notes**

1. Häyry M. *Rationality and the Genetic Challenge*. Cambridge, UK: Cambridge University Press; 2010.
2. Sterba JP. *Justice for Here and Now*. Cambridge, UK: Cambridge University Press; 1998, at pp. 2–3.
3. See note 1, Häyry 2010:43.
4. Ross WD. *The Right and the Good*. Stratton-Lake P, ed. Oxford: Oxford University Press; 2002.
5. See note 4, Ross 2002:160.
6. Brownsword R. Nanoethics: Old wine, new bottles. *Journal of Consumer Policy* 2009;32:355–79.
7. See note 6, Brownsword 2009:359.
8. Ashcroft RE, Dawson A, Draper H, McMillan JR, eds. *Principles of Health Care Ethics*, 2nd ed. Chichester: Wiley; 2007.