PRAGMATISM IN BIOETHICS:
BEEN THERE, DONE THAT

By John D. Arras

I. Introduction

It has often been remarked that bioethics is a quintessentially American phenomenon. Broadly speaking, bioethics as a field has tended to enshrine the value of autonomy, it places individual rights above communal well-being, and it has adopted a largely permissive and optimistic view of emerging biotechnologies. In contrast to much European thinking at the intersection of ethics and medicine, American-style bioethics has been resolutely middlebrow, eschewing grand philosophical schemes in favor of pragmatic policy-making and democratic consensus. It was, then, perhaps only a matter of time before various theorists began proposing a marriage between bioethics and pragmatism, which is the homegrown American philosophy.

The rise of a distinctly pragmatic strain of bioethical thinking promises to add a new dimension to the methodological ferment that has energized this field during the past ten years. Since the beginning of the contemporary bioethics movement in the 1970s, the field’s lingua franca and dominant methodological orientation has been the “principlism” of philosopher Tom Beauchamp and religious ethicist James Childress.1 Instead of grounding moral inquiry in either philosophical theory or the particulars of concrete situations, principlism has sought to locate the crux of moral reasoning in the identification, interpretation, and balancing of “middle-level” moral principles, such as those bearing on individual autonomy, beneficence, and justice. So dominant has been principlism’s reign within the field of bioethics that commentators routinely refer to Beauchamp and Childress’s articulation of these principles as the “Georgetown mantra.”


2 Beauchamp is a professor of philosophy at Georgetown University, and Childress taught there during the 1970s while they were working on the first edition of their book.
Within the past ten years, though, the partisans of alternative methodologies—including casuistry, narrative ethics, and feminism—have subjected principlism to sustained and sometimes withering criticism. This chorus of critics has recently expanded to include the partisans of a “new pragmatism,” who now stake their claim to methodological preeminence. The precise nature and import of this claim are, however, anything but clear. As it has been since the very beginning of American pragmatism, there appear to be several distinct versions of pragmatism vying for our attention and allegiance within this new context of inquiry. One important objective of my general project on pragmatism and bioethics is to disentangle and identify these various strands of bioethical pragmatism, and then assess their importance for ongoing methodological debates. Here, I first set out in Sections II–VI a distinctly pragmatist vision of the nature of philosophy and the role of the philosopher, noting along the way the implications of such a vision for bioethics and the role of bioethicists. In Sections VII–IX, I then explore in greater depth two central themes of John Dewey’s pragmatism as they might be applied to contemporary bioethics, namely, his approach to moral principles as “working hypotheses” and his doctrine of “democracy as a way of life.” I argue that most contemporary methodological approaches within bioethics, including recent versions of principlism, have already incorporated the central lessons that the new “pragmatist bioethics” wishes to teach. It thus remains unclear whether a refurbished pragmatism can make a distinctive contribution to the methodological ferment within bioethics.

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4 Narrative ethics, like casuistry, gives pride of place to the particularities of persons and social contexts as these are articulated within personal narratives. The emphasis here is on the trajectory of the “patient’s story” rather than on the abstractions of theory and principles. See John Arras, “Nice Story, But So What?: Narrative and Justification in Ethics,” in Hilde Lindemann Nelson, ed., Stories and Their Limits: Narrative Approaches to Bioethics (New York: Routledge, 1997).

5 Feminist criticism in bioethics has focused primarily on gender-related power imbalances in the health-care system. As contributors to the debate over method in bioethics, feminist critics of principlism have lamented the latter’s alleged overemphasis on abstract principle and neglect of personal relations, the emotions, and power in the analysis of moral problems. Many feminists are also moral particularists, and thus have much in common with casuists and narrativists. See, e.g., Susan M. Wolf, ed., Feminism and Bioethics: Beyond Reproduction (New York: Oxford University Press, 1996); and Susan Sherwin, No Longer Patient (Philadelphia, PA: Temple University Press, 1992).

II. First Fruits of Pragmatism in Bioethics

In one of the first studies to embrace an explicitly pragmatic approach to bioethics, law professor Susan Wolf discerns a pronounced shift in both bioethics and health law away from the abstractions of analytical philosophy and toward a more clinically oriented and empirical mode of analysis. In place of theoretically elegant academic treatises on such topics as advanced directives, Wolf endorses empirical research projects that might tell us how advanced directives actually work in the real world. In addition to this shift from armchair theorizing to the practical world of the clinic, Wolf also discerns a widespread effort within the field to focus more explicitly than before on feminist issues of power and voice. Feminist critics of the Georgetown mantra have examined the power relations between (male) physicians and (female) nurses and patients, explaining how power imbalances contribute to the exploitation of women and the marginalization of their legitimate concerns. Theoreticians representing minority groups, who have charged bioethics with privileging the concerns of white, male patients, have lodged criticisms similar to those raised by feminists of the dominant mode of bioethical discourse. While conceding that skepticism about elegant abstractions, a focus on empiricism and practical results, and a concern for the poor and disenfranchised can all be usefully described in a variety of ways, Wolf argues that pragmatism constitutes a particularly satisfying rubric for these disparate phenomena. In order to stress the extent to which this new pragmatism differs from a merely vulgar pragmatic concern for means and “results,” Wolf argues that the engine of pragmatic moral analysis should be animated by a vision of social justice and the empowerment of women, racial minorities, and other marginalized groups. Borrowing the self-description of the celebrated African-American neopragmatist Cornel West, Wolf closes her discussion with a call for a “prophetic pragmatism.”

While Wolf’s account of bioethical pragmatism attempts to place these current developments within the larger canvas of traditional American pragmatism and the recent revival of pragmatism in the academy, her reliance on classical sources such as C. S. Peirce, William James, and John Dewey is at best oblique and implicit. A much more straightforward attempt to develop a pragmatist bioethics on the basis of the classical pragmatist canon can be found in an important series of articles coauthored by philosopher Frank Miller and his physician colleagues, Joseph Fins and Matthew Bacchetta.

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approach to bioethics fails to bridge the gap between the ethical thinking
of philosophers and the clinical thinking of physicians, these authors
have attempted to develop a self-consciously “clinical pragmatism” based
directly on the philosophy of John Dewey. As we shall see more fully
below in Sections VII–IX, Miller et al. draw on two important themes
from Dewey’s corpus. First, they attempt to replace the rather formalistic
decision procedure of principlism with Dewey’s pragmatic method of
logical inquiry, which is an approach that stresses experimentalism, a
view of moral principles as “hypotheses” or presumptive guides to con-
duct, and a modest fallibilism. Second, they attempt to root a concern for
the procedural dimensions of bioethical quandaries in Dewey’s theory of
democracy as a way of life. According to this latter theme, standard
approaches to bioethical problems, such as principlism and even casu-
istry, converge in a “judgment model” that tends to focus exclusively on
what is decided. Equally important, though, claim Miller et al., is the
process through which decisions get made with the aim of reaching “satis-
factory resolutions” that all parties involved can accept. Alongside their
suggestions regarding the nature of moral principles and their role in
moral life, Miller et al. thus offer a “process model” of clinical pragmatism.

A third contribution to the marriage of bioethics and pragmatism is
provided by Glenn McGee, whose edited volume *Pragmatic Bioethics*
provides the first book-length collection of papers in this area.  
Although the scope and variety of contributions to this work defy easy summation,
several authors embrace Dewey’s “logic” of inquiry, his attempt to bridge
the gap between science and ethics, his “naturalistic” approach to moral
phenomena, and his emphasis on the role of culture and context in moral
judgment. In particular, Jonathan Moreno articulates the claim that “bio-
ethics is a naturalism,” a position that he had previously staked out in his
important book *Deciding Together*, which presaged much of the current
bioethical interest in Dewey and pragmatism. In addition to these meth-
odological contributions, McGee’s collection showcases two additional
sets of articles. The first is dedicated to the potential contributions of
such American philosophers as Peirce, James, and Josiah Royce to current
bioethical debates. The second is dedicated to the relevance of pragma-
tism for such specific issues as genetic enhancement, the definition of
death, and the ethics of managed care.

III. Why Pragmatism Now?

How can one explain this sudden surge of interest in pragmatism within
the field of bioethics? A large part of the answer, I think, has to do with

University Press, 1999).
the widespread perception that the heretofore dominant method of bioethics—namely, principlism—has failed to address adequately a cluster of serious problems besetting the field, especially those stemming from cultural diversity, and has therefore outlived its usefulness. The spectacle of the perennial boxing champ wobbling on the ropes has no doubt encouraged the partisans of pragmatism to enter the ring. But again, why pragmatism?

The most plausible narrative that I can conjure in response to this question focuses on the pivotal role of philosopher Richard Rorty in the recent revival of American pragmatism. The period from the end of the nineteenth century to the end of World War II represented the heyday of classical American pragmatism. Figures such as Peirce, James, Dewey, G. H. Mead, and George Santayana dominated the landscape of American philosophy, and Dewey was often proclaimed as the quintessential American philosopher. Following the war, however, pragmatism’s star began to fade rapidly. Dewey’s positions on both philosophical and political issues increasingly failed to engage a new generation of Americans. Philosophers became increasingly devoted to modes of analysis stressing logic, the role of language, and technical academic proficiency, while those searching for a more “relevant” connection with culture and politics opted for French and German existentialism or the Frankfurt School of Marxist criticism.12 This new generation of philosophers ran out of patience with Dewey, increasingly viewing him as a would-be sage rather than a technically proficient philosopher. Thus began the rather long exile of pragmatism from the mainstream of American philosophy. Although some of its central figures continued to attract sporadic attention as cultural icons in American history, and although some die-hard partisans of American pragmatism continued to limp along on the margins of academic respectability, the works of the great pragmatists were generally ignored in most “self-respecting” philosophy departments.

With the publication of Philosophy and the Mirror of Nature in 1979, Rorty began an ambitious and spectacularly successful intellectual reclamation project.13 In Rorty’s retelling of recent intellectual history, Dewey emerges alongside Heidegger and Wittgenstein as one of the greatest philosophers of the twentieth century. Downplaying Dewey’s enthusiasm for scientific method and his metaphysics of experience, while highlighting Dewey’s rejection of traditional dualisms (for example, mind and body) and his denial of absolute foundations in epistemology, Rorty

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went on to develop in a series of widely read and highly influential studies a revitalized image of pragmatism at the cutting edge of American intellectual life. Needless to say, Rorty’s version of pragmatism was highly idiosyncratic, and some partisans of “old-fashioned” pragmatism have repeatedly accused him of hijacking the name and reputation of pragmatism in the name of a dubious brand of “postmodernism”—a label Rorty vehemently rejects. But whatever the historical merits of Rorty’s appropriation of pragmatist authors and themes, it remains true, I think, that the proliferation of contemporary neopragnatisms and the widespread revival of interest in the original American pragmatists has been in large measure Rorty’s doing.15

IV. Which Pragmatism?

Before plunging into our examination of pragmatism and bioethics, a cautionary word about the complexity of this task is in order. Although pragmatism, both in its classical and neopragnatist incarnations, promises to add its share of insight and innovation to the ongoing methodological discussions within bioethics, a daunting preliminary problem must be addressed. I shall call this the problem of “too many pragmatisms.” From its supposed origin in James’s apparent (mis)appropriation of Peirce’s views on truth, pragmatism has been a contested concept in American philosophy and cultural life. There is simply no “essence” of pragmatism, no clear-cut definition by necessary and sufficient conditions; instead, we have many versions of pragmatism that often seem to be related by little more than the name. In the midst of his long-standing battle with Dewey, philosopher Arthur O. Lovejoy had already identified thirteen different versions of pragmatism,16 and we are still counting today. Thus, in order to assess the relevance and value of “pragmatism” for bioethics, we need to specify more exactly what we shall mean by this term. Accordingly, I shall sketch brief accounts of four different versions of pragmatism that figure in subsequent sections of this essay.

- Pragmatism as crude instrumentalism. Pragmatism is often described, always by its detractors, as a purely result-oriented approach to moral and political life. Unburdened by allegiance to moral prin-

14 Rorty’s many other publications include: The Consequences of Pragmatism (Minneapolis: University of Minnesota Press, 1982); Contingency, Irony, and Solidarity (Cambridge: Cambridge University Press, 1989); and Objectivity, Relativism, and Truth: Philosophical Papers.


ciples or ideals of virtuous conduct, this popular conception of pragmatism might be boiled down to the maxim, “If it ‘works,’ do it.” The implication is usually that pragmatists will break any moral rule, violate any principle, and ignore any and all individual rights in order to achieve desirable results. When pressed into the service of a field like bioethics, this vision of pragmatism would likely foster the image of the bioethicist as a mere technocrat in the service of “better living through biochemistry.” Although this sense of pragmatism has no basis in the texts of the great American pragmatists or their neopragmatist progeny, it persists in the popular imagination and in the writings of many otherwise sophisticated critics who ought to know better.17

• **Old philosophical pragmatism.** I shall use this term to denote in an extremely loose way the thought of classical pragmatists like Peirce, James, and Dewey, usually in contrast to contemporary neopragmatisms. Obviously, this common expression masks many important differences in both style and substance among this triumvirate. Peirce, in fact, renamed his doctrine “pragmaticism” in order to distinguish it from James’s version of pragmatism, and Dewey’s thought differs in many ways from both Peirce and James, especially in its focus on democracy as a way of life. In order to simplify my account, I will focus on Dewey’s pragmatism, primarily because it has the most fully developed ethical and political theory, and because Dewey has been the central figure in recent attempts to develop a pragmatist bioethics.

• **New philosophical pragmatism.** Although there is a wide variety of contemporary neopragmatisms—including the work of such figures as Stanley Fish, Hilary Putnam, Cornel West, and Richard Poirier18—I shall reserve the use of this term for Rorty’s highly influential brand of pragmatism, which basically boils down to a repudiation of rational foundations in epistemology, metaphysics, morals, and politics.

• **Freestanding (nonphilosophical) pragmatism.** Legal scholars have recently attempted to identify and defend a version of jurisprudential pragmatism that can stand on its own, apart from any

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justification in either old or new pragmatism. According to this view, one can be a pragmatist in a rough-and-ready, commonsensical way without appealing to any version of philosophical pragmatism. Conversely, these scholars hold that philosophical pragmatisms do not necessarily have any normative implications for this sort of freestanding legal pragmatism. As I argue elsewhere, much of the pragmatist revival in bioethics might be aptly termed freestanding in this sense.

Bracketing the crude instrumentalist notion of pragmatism as an uncharitable and misleading characterization, our agenda is now perhaps a bit clearer. We need to determine the extent to which pragmatism—defined either as old, new, or freestanding—can make a valuable contribution to the current debate over the methods of practical ethics. Another way to put this is to ask whether making a certain kind of progress in our inquiry into ethical methods will depend upon our turning to the pragmatist canon of Peirce, James, and Dewey and to the contemporary writings they have inspired. Although my focus will be on Dewey, I make no attempt to provide a comprehensive and coherent narrative of any one figure, let alone of all three founders of American pragmatism. One point deserves underscoring at the outset: Contrary to the view of Rorty and his followers, who contend that pragmatism as a philosophy has no bearing on how we should order our moral and political lives, the classical American pragmatists, and Dewey in particular, were committed to a much more positive vision of philosophy and its role in our public life. Writing near the end of his career in 1940, Dewey contended that “any theory of activity in social and moral matters, liberal or otherwise, which is not grounded in a comprehensive philosophy, seems to me to be only a projection of arbitrary personal preferences.”

V. A Pragmatist Primer

The classical pragmatist outlook is premised on a rejection of the doctrine of metaphysical realism. Pragmatists claim that we cannot intelligibly posit a realm of reality that exists independently of our own language, conceptual schemes, and practical activity. According to traditional philosophical doctrine, the job of human knowers is somehow to produce an

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20 See Arras, “Freestanding Pragmatism.”

adequate picture or representation of reality by means of ideas or perceptions. Our statements or theories about something are “true” whenever they accurately correspond to or mirror the state of affairs in question. Pragmatists call this the “spectator view” of human knowledge, and perhaps the only thing on which they all agree is that this traditional philosophical approach to reality and knowledge must be resolutely rejected.

In lieu of the spectator view, pragmatists propose a vision of human knowers as active, embodied, social agents whose projects and practices give rise to conceptual schemes through which they see and know the world. In place of the disembodied, disengaged, solitary Cartesian subject who seeks a purely objective and dispassionate knowledge of the real, the subjects of pragmatist philosophy are actively engaged in shaping the world that they attempt to know. The knowledge they gain will necessarily be colored by their interests, their projects, and their conceptual schemes. As James put it: “The trail of the human serpent is over everything.”

“Truth,” for pragmatists, thus has a lot more to do with “warranted assertability” and with what the community of inquirers will eventually settle on than it does with correspondence to a reality that supposedly exists apart from our dealings with it. Given our thoroughly situated point of view, truth for pragmatists will never be total or absolute. Although our contact with the world and with other people is indisputable for pragmatists, what we know about this world is always fallible, always subject to revision. And while the Cartesian knowing subject attempts to erect a philosophical system on an absolutely secure foundation of indubitable truth, the pragmatist views the corpus of human knowledge more holistically. The plausibility of any new proposition is thus related not to some rock-solid foundation, but rather to how well it can be integrated into our already existing stock of cognitive commitments.

An important implication of the rejection of the Cartesian spectator view of knowledge is an equally emphatic rejection of many traditional philosophical dualisms. Thus, the dualism of subject and object, so crucial to the Cartesian viewpoint, is swept away in favor of a fully contextualized knowing subject. The dualism of mind and body is replaced by a view of human beings as biological organisms whose thinking is viewed as one means among others of adapting to an environment. Likewise, ethics is taken out of the ethereal realm of the absolute and the a priori

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23 Many of these points are nicely summed up by James in ibid., 55–56:

A pragmatist turns his back resolutely and once for all upon a lot of inveterate habits dear to professional philosophers. He turns away from abstraction . . . from verbal solutions, from bad a priori reasons, from fixed principles, closed systems, and pretended absolutes and origins. He turns towards concreteness and adequacy, towards facts, towards action and towards power . . . It means the open air and possibilities of nature, as against dogma, artificiality, and the pretence of finality in truth.
and is thoroughly naturalized. The study of morality thus ceases to lust after timeless foundational principles in order to ask what actions and forms of social organization will best foster the flourishing of our biological and social natures. An important adjunct to this study is Darwin’s theory of natural selection, which helps explain the evolution of ethics itself as an adaptive form of human behavior.

The abandonment of the spectator view and its attendant dualisms has important implications for theorizing in the area of bioethics. One such implication concerns our understanding of the nature of certain pivotal concepts. Take, for example, our concept “death” in the context of our long-standing debate over the respective merits of conceptions of so-called higher- versus lower-brain death. According to the spectator view, our proper goal in this debate should be to fasten onto the true meaning of death so that we will then be able to determine exactly when it is appropriate to say that a human being has died. In other words, we need to align our concept of death so that it corresponds with the biological or metaphysical reality of death. Fixing on the correct definition of death is thus a matter of discovering a truth that is out there, regardless of our human projects and practices.

A pragmatic approach to this same problem would begin with the proposition that concepts like “life” and “death” are human constructs that serve certain human purposes. Instead of attempting to discover the meaning of these concepts in some sort of transtemporal and translinguistic realm, the pragmatist will frankly acknowledge that the meaning of the concept “death” is something that we construct or agree upon in order to advance various purposes, such as facilitating organ transplantation and providing appropriate care to certain categories of patients. The adequacy of any proposed concept of death will thus reside not in an imagined correspondence with reality, but rather in its ability to mesh well with our related intellectual, emotional, and social commitments. For the pragmatist, then, the crucial question has to do with which conception best coheres with the complex web of beliefs, actions, and projects that gives shape and meaning to our lives. According to philosopher Martin Benjamin, the answer to this question will depend upon what we feel is most important to the existence of a human being. In other words, do we believe that the ability to spontaneously respire and circulate blood is of primary importance, as the so-called lower-brain conception of death maintains? Or do we believe that our ability to think, reason, feel, and communicate with others—in short, our “personhood”—is most crucial to our understanding of human life, as the partisans of the so-called higher-brain conception of death maintain?24 Although Benjamin endorses the so-called personhood approach, his crucial pragmatist point

for our methodological debates is that the meaning of problematic concepts like “death” must be determined, not discovered, with a clear view of the human interests involved.

VI. The Philosopher’s (and Bioethicist’s) Role

The spectator view of knowledge has two implications for the role of philosophers and, by extension, for the role of bioethicists in society. First, the highest form of philosophical activity will be viewed as contemplation. The precise objects of this contemplative attitude will vary from one philosophical school to another. For the ancient Greeks, the proper objects of the philosopher’s attention were those “first things”—for example, Platonic Forms—that occupied the highest rungs on the great chain of being, knowledge of which would effectively ground all other knowledge. For Kantians, the objects of philosophical concern are those a priori structures of human experience that make knowledge possible. But whatever the objects in question, passive contemplation constitutes the quintessential activity for philosophies built on the basis of a dualism of subject and object.

Second, the spectator view of knowledge implies a very special role for philosophers vis-à-vis other disciplines within the general culture. According to Dewey, a conception of philosophy built on this model will tend to view philosophers as members of a kind of elevated secular priesthood. Armed with the knowledge of “first things,” philosophers are uniquely situated, according to this tradition, to expound on what is really real, true, valuable, and beautiful. Armed with a grasp of the a priori structures of knowledge, philosophers are uniquely situated to pass judgment on the claims of rival disciplines, such as literature and the social sciences, making sure that they do not transgress the boundaries of their own cognitive limitations.

Rejecting the spectator view of knowledge will thus have interesting and far-reaching implications for pragmatists attempting to “reconstruct” the tasks of philosophy and the role of philosophers. According to Dewey, once we abandon all pretenses of being the discoverers and guardians of “first things,” once we begin to envision knowledge as a practical matter involving engaged, embodied, social agents, we will then begin to see that throughout history philosophers have really been preoccupied with important values embodied in existing social institutions and cultures. We will also see that the greatest impetus to philosophy has been not some ineffable confrontation with the “really” real, but rather historical conflicts between inherited institutions and incompatible ideas borne aloft by new industrial, political, and scientific movements. And once we see this, Dewey concludes, we are then in a position to see that “the task of future philosophy is to clarify men’s ideas as to the social and moral
strifes of their own day . . . and . . . contribut[e] to the aspirations of men to attain to a more ordered and intelligent happiness." 25

This pragmatic approach substitutes a much more interdisciplinary and democratic conception of philosophy for the priesthood conception embedded in the spectator view of knowledge. Instead of “discovering” first things and first principles, the philosopher’s role is to reflect critically on his or her own culture and on the values embedded therein. Philosophers of a pragmatist bent will analyze and critique human objectives, asking in every case what would likely result for individuals and society from the implementation of those objectives. In addition, because emerging technologies tend to outstrip our ability to harness them for genuine human flourishing, philosophers will also have to assume the role of assisting society in the design of humane institutional responses to emerging scientific and technological trends.26

Philosophy so understood is a far more interdisciplinary venture than the “logical watchdog” role implied by the spectator view. As we shall see in subsequent sections, Dewey was particularly keen on forging alliances between philosophy and the social sciences. While philosophers scrutinized the values embedded in various actions, policies, and experiments in living, social scientists would be charged with studying the actual consequences of translating these values into social realities. This knowledge, in turn, could then be used to fine-tune or radically alter our original values and social objectives. In this way, theory and practice—ordinarily conceived as yet another dualism—would be merged, each providing guidance for the other. But in order to make this sort of contribution to intelligent reflection on our public life, philosophers will have to broaden their ambit of learning beyond the usual philosophical canon. In order to work side by side with political scientists, psychologists, sociologists, and economists, they will have to learn a great deal about these fields.

Dewey’s conception of philosophy is also profoundly democratic. In stark contrast to Plato’s philosopher-king, Dewey’s philosopher could perhaps be best described as a broker between the culture at large and the social sciences.27 In place of such legalistic Kantian locutions as the “tribunal” of reason and the “legitimacy” of knowledge, Dewey prefers metaphors drawn from town meetings and democratic deliberation. Instead of asking about the a priori structures of human reason, Dewey asks about what new forms of association we could agree on through the medium of democratic politics.28

27 Ibid., 8.
28 This contrast is nicely drawn in Richard Rorty, “Pragmatism and Law,” in Dickstein, ed., The Revival of Pragmatism, 310.
Having thus briefly sketched a picture of the kind of philosopher Dewey envisages after the fall of the spectator view of knowledge, I must say how striking the resemblance is between this sort of philosopher and the role assumed by bioethicists in the past few decades. Philosophers working in the field of bioethics, and especially those who have had sustained contact with clinical medicine and biomedical research, are in many ways a different breed than their mainstream academic counterparts. They tend to envision their role as one of helping society and the various professions clarify and assess the values embedded in various social practices. The impetus for much of their thinking is the urgent need to address value shifts occasioned by technological change. And they tend to work closely with other professionals, often publishing papers together, which in turn necessitates acquiring knowledge of the vocabularies and methods of other disciplines.

This shift toward a more pragmatic conception of the role of philosophers is most dramatically illustrated in the work of clinical ethicists. As Nancy Dubler, Leonard Marcus, and Jonathan Moreno have observed, philosophers and lawyers working in a clinical context must not only know about theoretical issues embedded in clinical situations, but they must also learn how to work with a wide variety of parties in fashioning mutually agreeable solutions to complex human problems. This, in turn, requires the acquisition of a wide variety of skills ranging from “ethical diagnosis” to dispute mediation. Thus, if bioethicists are seeking a larger philosophical account that will effectively frame and justify their emerging pragmatic and interdisciplinary roles in academia, medical clinics, and policy councils, Dewey’s work would be a natural starting point.

VII. Dewey’s “Logic” of Inquiry

Anyone in bioethics searching for methodological resources in pragmatism might naturally look to Dewey’s theory of experimental inquiry. While his books on ethics and politics discuss the substantive values that should inform our social thought, Dewey’s so-called “logical” works sketch a general, all-purpose approach to problem-solving that might prove useful

29 Nancy Dubler and Leonard Marcus, Mediating Bioethical Disputes (New York: United Hospital Fund of New York, 1994); Moreno, Deciding Together.

30 This collaborative and democratic model of contemporary bioethical practice contrasts sharply with H. Tristram Engelhardt, Jr.’s characterization of bioethicists as moral experts and secular priests. See, in this volume, H. Tristram Engelhardt, Jr., “The Ordination of Bioethicists as Secular Moral Experts.” Although Engelhardt tells a plausible story here about the rise of contemporary bioethics to public prominence against the backdrop of our society’s loss of faith in technocratic expertise and the public pronouncements of church leaders, his account of the social function of bioethicists is based upon highly selective evidence and, thus, bears little resemblance to the everyday reality of most bioethicists.
to bioethicists seeking to refine their methods.31 Although most philosophers understand “logic” to be a study of the purely formal relationships between concepts, Dewey conceived of his logic as a general approach for finding fruitful solutions to any kind of scientific or social problem.

Dewey regarded the “scientific method” as a great human achievement that makes it possible for our species to rise above reflex and habit and to therefore control nature and predict the future. Although other pragmatists, such as Peirce, restricted the range of application of this method to the natural sciences, Dewey sought to extend it to moral and social thought as well. Instead of resting the study of morals on mere intuition, Dewey sought to transform it into a field of scientific investigation, a kind of “materials science” of the moral life.32 Thus, instead of accepting a dichotomy between science and social thought, Dewey proposed that we view natural and social phenomena as two domains approachable through the same intellectual methods. The key similarity uniting the natural and social sciences with moral thought would be a common emphasis on experimentalism.

As Dewey sketched it in his book *How We Think*, this common pragmatic approach to problems involves the following logical steps: “(i) a felt difficulty; (ii) its location and definition; (iii) suggestion of possible solution; (iv) development by reasoning of the bearings of the suggestion; [and] (v) further observation and experiment leading to its acceptance or rejection.”33 I suppose that interesting things might be said about steps (i)–(iv) that would help advance the discussion of methodology in bioethics, but I do not know what they are. The necessity of identifying a serious (i.e., “felt”) problem, defining and locating it within a framework encompassing similar problems, rehearsing possible solutions, and trying to figure out in advance the likely implications of each suggested solution seems to me, as it probably did to Dewey, to be nothing more than dressed up common sense. The fifth step, however, is more promising.

Perhaps the most crucial way in which moral thought needs to become more scientific, according to Dewey, resides in the ongoing experimental testing of its results. It is not enough to have elevated feelings, confident intuitions, well-developed arguments, and even what we today would call reflective equilibrium among our intuitions, principles, and theories. The achievement of the best possible moral results requires, in addition, a continuous process of confirming, discrediting, and refining our hypotheses about what should be done or how society should be organized. Taking great pains to fasten onto a proposed means for solving a problem


32 Welchman, *Dewey’s Ethical Thought*, 68.

without bothering to examine how this solution actually works out in the real world is, for Dewey, a classic example of unintelligent thought and action. Yet one could argue that this is often standard operating procedure in bioethics.

Take, for example, the problem of safeguarding the welfare and rights of patients and healthy volunteers enrolled in clinical trials and other varieties of human experimentation. For decades, bioethicists have been at the forefront of efforts to craft rules and regulations governing the conduct of research on human subjects. Particularly noteworthy are the federal regulations that articulated the relevant ethical principles and rules of conduct and established a vast system of institutional review boards (IRBs) charged with the important task of reviewing the ethical suitability of protocols on the local level. Although this system is currently undergoing increased scrutiny, many years have passed in which it was simply assumed that the system was working as it was designed to do. On the level of local IRBs, committees would dutifully scrutinize the risk/benefit ratios and consent forms of hundreds of protocols each year without ever investigating whether genuine informed consent was actually obtained in the clinic.

Another classic example of this disconnection between theoretical elegance and concrete results is provided by the history of the living will in the United States. A great deal of ink has been spilled by bioethicists on the justifications of using living wills, on their supposed advantages and disadvantages, and on ways to expand their use by means of national and state legislation. But until fairly recently, no one thought it desirable or necessary actually to study the ways in which living wills affected (or, more to the point, failed to affect) clinical practice.34 As Dewey would have been the first to point out, though, living wills are most likely only one possible way of fostering the effective use of patients’ autonomy and helping them to secure a good (or at least decent) death. If studies show that living wills do not really alter physicians’ well-worn paths of clinical decision-making, then the bioethical community of inquiry needs to rethink its commitment to them. Perhaps some other, more systemic approach—that is, one relying less on the initiative of individual physicians—should be attempted and its comparative efficacy evaluated.

At this point, a resourceful principlist might counter that a concern for the practical consequences of our elegantly articulated and theoretically justified practices could easily be accommodated within the existing methodological paradigm. She might argue, for example, that the principle of beneficence could be used to justify the sort of ongoing experimentalism called for by pragmatically oriented bioethicists. Since that principle encompasses a broad utilitarian concern for securing good consequences,

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the satisfaction of desires, and human happiness, then surely, it could be argued, it could justify ongoing scrutiny of the IRB system and the role of living wills in the care of actual, terminally ill patients. Indeed, if research subjects and dying patients would be better off in a society that did, in fact, routinely assess and refine its practices in these areas, then the principle of beneficence would require this sort of experimentalism—assuming, of course, that the costs of doing so were not excessively high.

In response, contemporary pragmatist bioethicists might contend that although the benefits of periodically assessing and refining our social practices are obvious, principlists have simply been oblivious to them. Principlism can, in principle, accommodate the pragmatists’ demand for a more experimental attitude, but this has simply not happened. Why not? My best guess is that principlists have been observing a reasonable but unrealized division of labor. Trained primarily in philosophy, religious studies, medicine, and law, bioethicists have been entirely preoccupied with doing what they do best—namely, engaging in conceptual and normative debates about the best (or least worst) actions and policies to adopt. Although they may have also been vaguely concerned about how their favored policies fared in actual experience, bioethicists have been reluctant to engage in the sort of “outcomes research” for which they are woefully ill-prepared. This kind of research requires the skills of a well-trained social scientist or epidemiologist, not those of the well-trained armchair philosopher. The fault, then, lies not simply with the methodology of principlism, but rather with the entire field of bioethics, which long ago should have forged productive working relationships with social scientists who could help them, in Dewey’s words, to validate their working moral hypotheses regarding the best outcomes.

As Wolf has noted, however, the field of bioethics has recently witnessed the rise of a new and salutary empiricism. Beginning with a few modest clinically based studies of do not resuscitate (DNR) orders in the early 1980s, which later blossomed into some extremely ambitious multicenter studies of informed consent, advance directives, and terminal care in the 1990s, this more empirical branch of bioethics is now supplying the sort of experimentalism demanded by Dewey’s method of inquiry.

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35 An analogous case of principlism failing to exploit its own latent resources has come to light through the feminist critique of bioethics. Although the principle of justice could, in theory, have provided principlists with ample resources with which to reveal and criticize various forms of gender-based inequities in medicine and research, it was not until the advent of the feminist critique that principlists began noticing the existence of a problem.


Through such studies, we are now learning about some rather large gaps separating bioethical theory and practice. In moving to fill those gaps with reliable empirical studies, the field of bioethics is beginning to achieve what Dewey envisioned, namely, a marriage between the methods of philosophy and the social sciences.  

**VIII. A Pragmatist View of Principles**

The aspect of Dewey’s moral theory that is perhaps most relevant to contemporary debates about method in practical ethics is his account of rules and principles. In keeping with his rejection of the spectator view of knowledge, Dewey rejects the notion that the objects of moral knowledge are somehow “out there” waiting to be discovered by objective and disinterested moral agents. Indeed, Dewey tends to define his whole approach to morality in opposition to a view of principles as fixed, rigid, and absolute commandments. Such a view, he argues, forgets that principles arose from experience as human constructs; it therefore misconstrues the proper role of principles in our moral experience. Indeed, Dewey regards the most misleading but ubiquitous temptation of moral life to involve the transformation of principles into rules for the easy disposition of hard cases. The Ayala case provides a classic example of this tendency in bioethics. Confronted by a couple that had decided to conceive a child in order to obtain a good match for a bone marrow transplant into their terminally ill daughter, some bioethical pundits immediately declared, prior to any serious investigation of the particulars, that such a scheme would violate Kant’s categorical imperative against treating persons as mere means.

Dewey views principles as broad generalizations gleaned from eons of human experience bearing on the sorts of consequences and values that tend to be realized in various situations. In contrast to rules, which he regards as rigid and fixed practical directives that tell us what to do,
principles are viewed as flexible tools for analyzing moral situations. Principles thus provide us with general ideas for organizing our moral experience and making sense of what is at stake in particular situations. Importantly, principles do not dictate right answers; they do not tell us what to do. They do, however, help us think through situations so that we might make responsible decisions. Answers are thus provided not by the principles themselves in isolation from experience, but rather by the situation in its entirety, including, of course, the weight and bearing of relevant principles. In this sense, principles, for Dewey, are best conceived as being one important ingredient in the mix of raw materials for moral judgment. There is no mechanical substitute for judgment amid a welter of particulars, a fact often brushed aside by our quest for simplicity and certainty.

Whereas the impulse to apply rigid universal formulas with absolute certainty to particular cases appears to stem from a mathematical ideal, Dewey drew his inspiration from the experimental sciences. In a celebrated and oft-quoted passage from *Human Nature and Conduct*, Dewey observes that principles are best conceived as hypotheses with which to experiment. Viewed as predictions of how things are likely to go if certain values are deployed in particular situations, principles in Dewey’s scheme thus require testing and verification through ongoing experience. No final judgment on the appropriateness of invoking any particular principle can be made until we discover its concrete effects on our characters and our communities. Principles are thus useful—but merely presumptive and provisional—guides to conduct.

An important implication of regarding moral principles as tools is that they must be constantly adapted and upgraded to meet the challenges of new experiences. Just as ordinary household tools, such as screwdrivers and socket wrenches, are constantly being modified and improved by their manufacturers, so moral communities must constantly reassess and refine their moral principles in light of their current needs and social conditions. Principles adapted to the resolution of quandaries in one

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42 Bernard Gert et al. charge that Beauchamp and Childress’s principles function as mere “chapter headings”—i.e., as categories of important values to consider as we make moral choices—as opposed to precise, action-guiding rules of conduct. See Bernard Gert, Charles Culver, and K. Danner Clouser, *Bioethics: A Return to Fundamentals* (New York: Oxford University Press, 1997). Interestingly, Dewey would side with Beauchamp and Childress in this debate, challenging the belittling qualifier “mere.” Thus, even though contemporary pragmatists have opposed much in the method of principilism, the latter’s principal exponents agree with Dewey that principles are initially framed at such a level of generality that they cannot be definitively action-guiding in the absence of additional specification, balancing, and good judgment.

43 Note in this connection Moreno’s claim that within a naturalistic or pragmatist approach to ethics, facts tend to overwhelm theory. See Jonathan Moreno, “Bioethics Is a Naturalism,” in McGee, ed., *Pragmatic Bioethics*, 13.


time and place may be completely unhelpful, inappropriate, and counterproductive when applied to novel situations. A good example is the Catholic Church’s long-standing moral prohibition of usury. Such a ban made good sense during most of human history when it functioned as an impediment to the exploitation of vulnerable and needy people. But in the late Middle Ages, the rise of a mercantile economy, based on long-term investments and the assumption of great risks, transformed this restriction into an unjust and otiose obstacle to human flourishing. Thus, the principle concerning exploitation gradually came to be seen as simply no longer applicable to this category of money lending; the scope of the principle had changed.

Miller, Fins, and Bacchetta have seized on Dewey’s theory of the nature and function of moral principles in their critique of principlism. Echoing Dewey’s denunciations of principles conceived as “absolute” and “fixed” rules of conduct, Miller et al. suggest that bioethicists would do well to begin viewing principles as flexible tools that are constantly being refined until they are capable of giving our experience “the guidance it requires.” Although this restatement of Dewey’s theory has the ring of plausibility to it, there are two problems confronting this particular pragmatist contribution to the bioethical method wars. First, it is unclear who the enemy is in this picture. While Dewey was engaged with real antagonists, both in philosophy (for example, Kant) and popular culture, who apparently believed that any deviation from fixed and absolute moral principles would result in moral anarchy, Miller et al. are addressing a community of bioethical inquirers that has by and large enthusiastically embraced the plasticity of principles. Admittedly, the early editions of Beauchamp and Childress’s *Principles of Biomedical Ethics* unfortunately featured a flow chart moving from moral theory to principles to rules and finally to case judgments; such a diagram might have suggested that the origins of moral principles lay in some empyrean realm untouched by time and contingency. However, Beauchamp and Childress have long since explicitly repudiated both that diagram and the account of moral principles implied by it. In response to the assertion of contemporary casuists, such as Jonsen and Toulmin, that principles not only apply to particular judgments but also actually grow out of them, the exponents of principlism have affirmed the dialectical relationship between principles and particular judgments, and have thereby embraced the widely endorsed method of “reflective equilibrium” advanced by philosopher John Rawls and his followers. Thus, if pragmatists believe that moral prin-

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46 For an instructive account of this episode in moral history, see Jonsen and Toulmin, *The Abuse of Casuistry.*
47 Miller et al., “Clinical Pragmatism,” 142.
48 According to Rawls, principles are developed both to systematize our firmest intuitions about particular propositions and to extend our judgments in less clear cases. Importantly, however, he observes that principles can also be revised or rejected on the basis of partic-
principles are both action-guiding and the products of continual refinement in the crucible of concrete cases, then Beauchamp and Childress are pragmatists. For all its verisimilitude, then, the “clinical pragmatist” theory of principles advanced by Miller et al. turns out to be a mere restatement of principlism as presently understood by its chief exponents. It may be the best way to think about principles, but it can hardly be counted as an advance beyond or a contribution to the debate over method in practical ethics.

A second problem with adopting Dewey’s theory of principles for bioethical purposes goes to the heart of Dewey’s view. Suppose we grant that principles should be conceived as hypotheses for further experimentation and verification. The question then arises, How do we know when the deployment of any given principle has been vindicated by experience? Unlike experiments in science, it is unclear what would count as a successful or fruitful result that would validate, post hoc, an ethical experiment. Certainly those of a Kantian persuasion will reject the suggestion that any amount of good consequences accumulated through future experiences can redeem, say, the widespread violation of human rights.

Take, for example, the question whether members of religious or ethnic minority groups, such as Christian Scientists or the Hmong, should be allowed to withhold medically necessary treatments from their children. Suppose that a bioethicist proposes that in such cases legal coercion compelling treatment is justified as a last resort. The question then arises: What sort of results would demonstrate that the operative principle here gives our present experience “the guidance it requires”? Certainly, lives will be saved—and that should count for a lot. By the same token, though, particularly firm moral intuitions. The goal of moral reflection, he claims, is to continually adjust our principles, our firmest intuitions, and our background theories of persons and society until they harmonize in “reflective equilibrium.” See John Rawls, A Theory of Justice (Cambridge, MA: Harvard University Press, 1971), 20–22.

This is not to say that everyone operating within the field of bioethics always employs principles in this flexible way. Secular thinkers of a more traditional bent, such as Leon Kass, or conservative Roman Catholics, Protestants, and Jews, are far from embracing pragmatist modes of moral thought. See, e.g., Kass, Toward a More Natural Science; John J. O’Connor, “Abortion: Questions and Answers,” Human Life Review 16, no. 3 (1990): 65–96; Paul Ramsey, Ethics at the Edges of Life (New Haven, CT: Yale University Press, 1978); and David Bleich, Bioethical Dilemmas: A Jewish Perspective (Hoboken, NJ: Ktav Publishing House, 1998).

Indeed, perhaps the most interesting link between pragmatism and a theory of practical reasoning in bioethics is to be found not in the writings of Dewey, but rather in the “pragmatic” writings of post–World War II Harvard philosophers W. V. O. Quine and John Rawls. Quine conceived of human knowledge as a “web of belief,” while Rawls eschewed foundationalism in moral theory in favor of reflective equilibrium. I thank Christopher Morris for this observation. See W. V. O. Quine and J. S. Ullian, The Web of Belief, 2d ed. (New York: Random House, 1978). I would emphasize, however, that acknowledging such a connection between contemporary versions of pragmatism and current methods of bioethics does not advance the claim under discussion—namely, that we need to develop a pragmatist bioethics in order to improve the way we currently do ethics.

a great cost will be imposed on these groups in terms of their religious and psychological integrity. How should a pragmatist sort out these consequences? Clearly, some sort of criterion of “success” would come in handy, especially when the benefits and burdens of different principles would be mediated through competing conceptions of value and the good life.

Miller et al. try to advance this discussion by proposing that consensus be viewed as the overarching goal of clinical-pragmatic deliberations. An obviously false start in this direction would be for clinical pragmatists to maintain that any and every consensus, no matter what its substantive content or its procedural origins, constitutes a morally respectable terminus of ethical deliberation. But this clearly will not do, and Miller et al. realize this. We could, for example, imagine a consensus reached between two or more parties of vastly unequal power, wealth, or information. The weaker party might agree to a manifestly unfair resolution merely because not agreeing might make its situation even worse. In order to avoid such a scenario, the clinical pragmatists insist on certain qualifications. Consensus is still described as the goal of pragmatic deliberation, but only consensus that “can withstand moral scrutiny” or consensus reached through a “thorough process of inquiry, discussion, negotiation, and reflective evaluation.” As political theorist Lynn Jansen points out, however, it is unclear whether clinical pragmatism harbors sufficient resources to help us distinguish legitimate from morally suspect instances of consensus. She contends that one way in which more traditional approaches to morality make this distinction is by appealing to fixed moral principles, rules, and maxims. At the very least, the clinical pragmatists owe us an account of what would count as sufficient “moral scrutiny” and what values would animate their “reflective evaluation” of agreements.

The root of the clinical pragmatists’ problem here, I think, lies in their conception of moral principles as hypotheses. It is one thing to claim that principles are not fixed, eternal, and absolute, and that they must be adapted and refined by each new generation to meet changing circumstances. It is another thing to claim that principles are essentially predictions (if P, then Q) of what will happen if we uphold certain values. Suppose that a team of social scientists demonstrates that Q is what you get when you pursue moral principle P; that is, to use Dewey’s formula, suppose they have validated the original hypothesis that if you act on a certain set of values, you will get a corresponding moral character or social structure. What then? Suppose that there are other, competing visions of what our characters and our society should look like. How are we to choose among them? This, I take it, is the traditional role allotted to

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52 Miller et al., “Clinical Pragmatism,” 130.
moral principles in ethics and the theory of justice. This role is normative, not predictive. While it is true that principles exist in the first place in order to foster human flourishing, their role is to help us choose between various possible future states of affairs, not merely to predict their occurrence. This confusion is the result of Dewey’s interesting but misguided attempt to recast ethics as a kind of scientific enterprise with all the trappings and vocabulary of experimental methodology.

In spite of the terminological confusion noted above, Dewey was perfectly aware of the need to evaluate competing actions and policies driven by incompatible values. This, after all, is what ethics is largely about. Indeed, in some important sections of his *Ethics*, a text curiously ignored by all the theorists eager to revive pragmatism within bioethics, Dewey develops a standard against which competing individual and social possibilities should be judged. Importantly, this standard is substantive, not merely procedural; it advances a particular vision of the good based on a distinct conception of human nature and its place in the natural and historical worlds, not just on a vague notion of consensus.55

According to Dewey, a moral problem is defined as a challenge to an individual’s or group’s current habits of action. Such a problem poses the question, What sort of being does the agent wish to become? The fundamental question for Dewey’s ethics is thus a matter of character or self-realization. A good person’s character, according to this view, is naturally harmonious, flexible, and stable. In choosing between actions, and the habitual dispositions to which they give rise, Dewey contends that the good person will opt for social or other-regarding dispositions as the only kind that can nurture a character that is harmonious, flexible, and stable.56 In other words, our happiness and ultimate good are internally linked to the common good. A life based upon purely individualistic dispositions of the sort celebrated by libertarian devotees of philosopher Ayn Rand is necessarily “warped,” according to this standard.57

It is well known that the concept of growth figures prominently in Dewey’s ethics and political philosophy. Contrary to some popular misconceptions of it as an egoistic or narcissistic doctrine, Dewey’s conception of growth stressed the importance of self-realization through a common form of life with family, friends, and the larger community. An important objective of moral action, Dewey thinks, ought to be the liberation of individuals for the realization of their capacities as rational, autonomous beings. In contrast to the merely negative image of freedom animating much liberal thought, Dewey’s notion of freedom is positive, involving

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55 Although Dewey rejected traditional metaphysics, especially its attempt to ground human knowledge and behavior in an absolute, unchanging realm of being, he did develop a rival metaphysics of human nature based instead on our thoroughly contingent biological, social, and historical existence. See Dewey, *Human Nature and Conduct*.

56 Welchman, *Dewey’s Ethical Thought*, 162.

not just protection of others’ private space but their capacity for self-realization as well. Importantly, such a positive notion of effective freedom would naturally include a concern for the social, economic, and psychological preconditions of everyone’s self-realization. A society that maximizes the capacities of individuals to grow in this way is Dewey’s notion of the good society, and I take this to be the standard against which he would judge competing actions and social policies. As Dewey himself puts it:

The moral criterion by which to try social conditions and political measures may be summed up as follows: The test is whether a given custom or law sets free individual capacities in such a way as to make them available for the development of the general happiness or the common good. This formula states the test with the emphasis falling upon the side of the individual. It may be stated from the side of associated life as follows: The test is whether the general, the public organization and order are promoted in such a way as to equalize opportunity for all.58

At the foundation of Dewey’s ethics, then, lie the metaphysical propositions that humans are naturally social creatures and that the good for individuals is a social good. In contrast to the rather thin procedural notion of consensus posited by Miller et al. as the objective of clinical pragmatic thinking, Dewey elaborates a robust substantive standard that contemporary bioethical pragmatists might consider as a measure of the relative value of various actions, policies, character dispositions, and experiments in living. Such a standard would, I think, yield quite felicitous recommendations in many areas of bioethics, especially those that have been marred by excessive individualism and a lack of concern for our sociality.

On the downside, however, Dewey’s ultimate ethical principle—namely, the claim that individual growth (in the deepest sense) can only be achieved in the context of social action—might face stiff opposition in the contemporary philosophical milieu. Resting squarely upon a manifestly metaphysical and teleological view of human flourishing, this principle, although not incoherent by any means, would nevertheless be regarded by many as being quaintly out of fashion. Others would note that this moral conception, when pressed into the service of Dewey’s political philosophy, would constitute an affront to ethical pluralism. Great artists like Gaugin provide evidence that some idiosyncratic routes to self-

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realization might not take a wholesomely social direction. And political philosophers like Rawls and his followers would note that Dewey’s political thought, grounded as it is in a controversial theory of human nature, expresses a “comprehensive moral view” of the sort that should not be imposed by the state on the free and equal citizens of a liberal polity. Although Dewey sincerely believed that philosophical reflection on human nature and culture would reaffirm his conclusions, many of our philosophical contemporaries find that reflection is more likely to yield differences and discord.

IX. Pragmatism, Democracy, and Process in Bioethics

Another aspect of Dewey’s work that should be freighted with bioethical consequences is his political philosophy—more specifically, his theory of democracy. As Miller et al. point out (see Section VIII), democracy for Dewey means not simply one formal mechanism of government as opposed to others, but rather a lofty moral ideal involving mutual participation and cooperation in a common life. Democracy, for Dewey, is thus best conceived as a “way of life” in which citizens deliberate together about common problems and their solutions.

Notwithstanding its initial attractiveness to modern ears and its all-American appeal, Dewey’s conception of democracy is by no means obviously right. It has faced stiff competition in the marketplace of ideas both in Dewey’s time and our own. Indeed, comparing and contrasting Dewey’s theory of democracy against two alternative political theories will help us sharpen our understanding of its most important features. One long-standing alternative to Deweyan democracy is rule by elites. In this Platonic alternative, the claim is that governing is a tricky business, one requiring great knowledge and skill. Just as we would not leave the training of an expensive racehorse to a rank amateur, so society should not entrust its public governance to those lacking the requisite expertise in the craft of governing. This, it might be argued, is especially true in an age like our own, characterized by rapid technological change in which many public issues, such as the use of nuclear power, appear to dwarf the comprehension of the average person. If democracy means the rule of the great mass of unskilled citizens, then, according to this view, it is a defective form of government.

Dewey’s response to this Platonic vision of politics is to note that a ruling class of “experts” would soon become isolated from knowledge of the needs that they are supposed to serve. Before long they would begin ruling so as to make the government serve their own interests as a specialized class. He argues that there is a legitimate, even indispensable,
role for experts in discovering and disseminating knowledge about the
factual bases of social policy, but that the actual making of policy should
depend upon people who can judge the relevance of these factual inves-
tigations for the overall good of society.61 Dewey complemented this
response to elitism with an argument based upon the value of freedom to
individuals. Even if an elite ruling class were to somehow find a way to
discern the genuine interests of the great mass of people, such a good
“procured from without” would ignore the interest we all have in gov-
erning ourselves.62

A second competing political theory agrees with Dewey that democ-
rary is the best way to organize society, but this preference is based upon
democracy’s capacity to aggregate the preferences of disparate individ-
uals. Voting, majority rule, and frequent elections ensure that everyone’s
preferences will be counted and considered in the formulation of public
policy. This “atomistic individualistic” conception conceives of the com-
mon good as nothing other than the result of aggregating a great host of
individual preferences. Public choices are thus made on the basis of the
sum total of so many private acts of voting. Since this view does not
conceive of the common good as being anything other than the aggrega-
tion of private choices, there is no need for communal deliberation about
shared societal goals. Indeed, the political process on this view is primar-
ily a domain of self-interested bargaining and deal-making by various
private interest groups.63

For Dewey, by contrast, a democracy is first and foremost a community
of people who engage in practical deliberation over the common good.
This implies that democracy has an educational function. By participating
in public discussion and debate, each of us must learn to cast our own
desires and interests in the language of the common good. As we do so,
we may discover that what is good for us is not necessarily good for our
society, and we learn that others have interests that must be recognized as
well. As a result, instead of simply registering our own private wants and
needs in the shrouded secrecy of the voting booth, the citizens of a Dew-
eyan democracy must use their critical intelligence to forge common so-
lutions, a process that often leads to the transformation of their original
interests. Contrary to those who hold that there is no common interest or
public good, but only individual wants and needs, Dewey is convinced
that there is a common good. He recognizes, however, that the demands
of the common good are often obscure. In order to achieve clarity con-
cerning a society’s proper goals, Dewey asserts that our highest priority
should be to improve the methods and conditions of public debate and

202–9.
62 See Festenstein, Pragmatism and Political Theory, 81.
63 Ibid., 8.
discussion. Instead of searching for experts to do this job for us, the citizens of a democracy must sharpen their skills of critical intelligence and persuasion. This, he says, is the problem of the public.  

Hilary Putnam, a contemporary philosopher who regards Dewey as one of his heroes, extends this line of reasoning into what he calls an “epistemological justification of democracy.” In contrast to Dewey himself, who appears to have grounded his political philosophy upon his own naturalistic and teleological conception of the individual, and in contrast to Rorty, who has no interest in a philosophical justification of democracy (or of any other important contemporary practice), Putnam argues that democracy is a precondition for the exercise of critical intelligence in the service of solving social problems. That is, if we wish to harness our individual resources in a collective effort to solve our problems in the best way possible, we must also wish to do this within the context of a democratic public space. In opposition to political regimes that govern by fiat or appeals to authority, Dewey and Putnam argue that the most effective way actually to solve social problems is by means of intelligent experimentation. Two things are necessary, though, in order to accomplish this. First, we must have the freedom to experiment that democracy makes possible; second, we must have an educated public, not one that merely submits to authority. For Putnam (and implicitly for Dewey), all forms of authoritarianism are thus cognitively self-defeating. What we have here, then, is an epistemological (as opposed to a moral) justification of democracy.

What is the relevance of these Deweyan reflections on democracy for our current methodological debates within bioethics? Given Dewey’s insistence that democracy is a way of life and not simply a governmental structure, we should expect its moral ideals to extend well beyond legislative chambers to encompass the making of health policy, the work of hospital ethics committees, and the physician-patient relationship. According to Miller et al., whose work constitutes by far the most sustained and penetrating effort to wring bioethical implications out of Dewey’s corpus, the Deweyan account of democracy carries vital lessons for the ethics of the physician-patient relationship. Dewey’s embrace of deliberative processes of self-government and his corresponding critique of all forms of authoritarianism could provide additional justification for the doctrine of informed consent understood as a process of shared decision-making. Rather than merely imposing “doctors’ orders” on patients, phy-

66 To squeeze Putnam into our grid of old versus new pragmatists, it would perhaps be best to label him a “new old pragmatist”—new, because he is our contemporary, and old, because unlike Rorty he is trying to forge a philosophical argument for the justification of democracy that Dewey himself could have endorsed.
sicians must enter into a dialogue with them as full partners in the healing enterprise. Furthermore, although Miller et al. do not call attention to this, one could note that Dewey’s theory of the proper role of experts in a democratic society uncannily prefigures the division of labor that is allotted to physicians and patients in the modern legal doctrine of informed consent. Just as it is the Deweyan expert’s job to secure the technical facts that will later be subsumed into democratic deliberations about the common good, so the physician’s proper role in this legal doctrine is to provide the patient with all the facts he or she needs in order to make a reasonable judgment. Dewey would no doubt also note, however, that experts and citizens, physicians and patients, can educate each other in their respective encounters and thereby soften the rather strict division of labor noted above. Physicians can help patients see that their original preferences might be counterproductive, while patients can help physicians see the larger humanistic dimensions of their calling.

Deweyan democracy has also served as the inspiration for the clinical pragmatists’ interesting “process model” of bioethics. Miller et al. observe that the standard brands of bioethical reasoning—including both principilism and casuistry—converge in what they call a “judgment model.” According to this model, the task is simply to find the right answer to any given moral problem. The bioethicist wields various principles or paradigmatic cases in an effort to discern what ought to be done in a particular case. Crucially, note the clinical pragmatists, this is a task that could theoretically be performed by a single individual in the privacy of her study. Although they do not denigrate the need for this sort of critical reflection on principles and cases, the clinical pragmatists wish to stress what might be called the “process dimensions” of most bioethical quandaries. The typical case involves not simply an isolated thinker who comes to a judgment, but rather a whole panoply of players—including the doctor, the patient, the medical team, the patient’s family, and, in many unfortunate cases, the hospital’s administrators and attorneys—who must work together to forge a decision that will ideally be acceptable to everyone. Although they are all working toward a final judgment, these people must first engage in a shared process of discussion, negotiation, compromise, and consensus. They must not only do the “right thing,” considered as an intellectual abstraction; they must also see to it that everyone with a legitimate stake in a given case is allowed their say, so that when all is said and done, the participants will be able to continue working with each other and respecting each other as moral equals. Sometimes judgments that seem right in the abstract no longer strike us as right all things considered.

67 Fins et al., “Clinical Pragmatism,” 43.
Having established that Dewey’s pragmatic theory of democracy has implications for various issues in bioethics, we must now ask to what extent this theory makes a valuable contribution to our methodological debates in bioethics. Or as Dewey’s pragmatist colleague, William James, would have put it, what is the “cash value” of Dewey’s democratic theory for us today? This question needs to be unpacked into two separate issues. First, there is the question of whether Dewey’s ideas about democracy are valid, interesting, or attractive in their own right. Second, we need to ask whether these ideas will enrich our ongoing discussions about method.

As for the validity or ongoing appeal of Dewey’s theory, I would argue that his view of democracy as a way of life is an extraordinarily powerful idea that is full of implications for contemporary societies. In its emphasis upon democracy as a deliberative community, Dewey’s theory bears a striking resemblance to contemporary work under the rubric of deliberative democracy. Both of these “old” and “new” perspectives stress the transformative dimensions of deliberative communication, the existence of a common good, and the centrality of deliberation to the legitimacy of political decisions broadly construed. Furthermore, the clinical pragmatists’ emphasis on shared decision-making and their “process model” strike me as being quite legitimate extrapolations of Dewey’s theory and as important foci for contemporary bioethical theory and practice.

Determining the “cash value” of these contributions, however, may lead to a more guarded endorsement. In the first place, although it is true that our contemporary notion of shared decision-making is fully consistent with Dewey’s democratic theory, it is not at all clear that we need Dewey’s theory in order to vindicate or even clarify our current understandings of informed consent and physician-patient communication. In view of the pivotal and dispositive role of various Kantian and utilitarian theories of autonomy in the ultimate vindication of our moral and legal theories of informed consent, it is hard to imagine why anyone today would need to invoke this aspect of pragmatism. Doing so at the clinical pragmatists’ insistence would merely amount to gratuitous theoretical overdetermination.

The same might also be said of the clinical pragmatists’ “process model” of bioethical decision-making. Again, this emphasis on process, consensus, and compromise involved in reaching responsible clinical decisions can plausibly claim a direct lineage back to Dewey, but the importance of

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process hardly comes as a revelation to the bioethical community at the turn of the twenty-first century. Numerous important studies have already been devoted to the interpersonal dimensions of bioethical decision-making at all levels, from national and state bioethics commissions, to hospital bioethics committees, and finally to clinical ethics consultations at the bedside. It is noteworthy that none of the authors of these studies felt compelled to invoke Dewey’s theory of democracy as a way of life in order to justify or buttress his or her own emphasis on process. An alternative explanation for the recent emphasis on process in bioethics might stress the resemblance between clinical bioethics consultation and various forms of hospital-based social work and psychological counseling in which process values tend to predominate.

Thus, although Dewey articulates a powerful vision of democracy with definite implications for the process of doing bioethics, the values embedded in those implications are by no means unique to Dewey’s thought. They have, in fact, been available for years under different descriptions both in our general culture and in our specific bioethical community. The crucial questions, then, are: What is to be gained by attaching the label “pragmatist” to this increasingly widespread emphasis on process? Would we gain any additional clarity or insight by linking our current notions of process to Dewey’s account of democracy? At the very least, Miller et al. owe us a more convincing answer to these questions.

X. Conclusion

My skepticism about the value of invoking Dewey’s accounts of moral reasoning and democratic theory for current bioethical inquiry should not be read as a dismissal of his abiding importance and influence as a philosopher and cultural commentator. In a curious way, the fact that we do not need to invoke Dewey today may constitute the best evidence of his pervasive and enduring influence on American political thought. It may well be that we do not need to invoke him precisely because his ideas have already permeated every corner of American life and now strike many of us as just so many commonsensical features of our political landscape. The question remains, however, how

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70 Evidence for this hypothesis can be found on the back cover of my edition of Dewey’s The Public and Its Problems, which features a blurb from The Whole Earth Catalogue: “[I]n this book, the dazzlement [?] of Dewey’s ideas] is fully let loose in a series of far-out proposals for experimenting with altered life styles!” Far out, indeed.
dusting off our old copies of Dewey’s major works will actually advance our current understandings of moral reasoning, informed consent, or the processes of bioethical decision-making. In my view, it will not, but there are still plenty of good reasons for reading and appreciating Dewey’s contributions to philosophy and democratic theory.

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