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A Philosophical Exploration of Trust

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A PHILOSOPHICAL EXPLORATION OF TRUST

by

Rodger Laine Jackson

a dissertation

submitted to
Michigan State University
in partial fulfillment for
the degree of

doctor of philosophy

department of philosophy

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ABSTRACT

The aim of my dissertation is to lay the foundation for a substantive exploration of trust. In Chapter One I explain why such an exploration is important and speculate as to why the topic has been largely ignored by the philosophic community. In Chapter Two I construct a definition of trust that allows it to be differentiated from related concepts such as reliance and dependence and explicate some of the reasons as to why trust matters so much to us. In Chapter Three I present the conditions under which we can reasonably apply the definition worked out in Chapter Two toward collectives such as organizations and professions. In Chapter Four I explain some of the moral dimensions of trust and construct a framework that allows us, within limits, to address ethical questions involving issues of trust. In Chapter Five I use this framework to examine some issues concerning the physician/patient relationship. In Chapter Six I use this framework to examine some issues concerning teacher/student relationships.

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*This work is dedicated with all my love and respect to my favorite philosopher,
Melanie L. McLeod*

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CHAPTER ONE

WHY THINK ABOUT TRUST?

Consider the following narrative:

Joe and Maggie Griffith, a couple in their early forties, have been married twenty years and have two children, Ken and Maria, aged 10 and 17 respectively. They share a joint position in the economics department at a medium sized Midwestern university, and this year they will be taking a sabbatical in Bangkok, Thailand. This is the first time either one of them will have gone abroad. Joe has secured a one year post working for the U.N., while Maggie plans to do independent research on international labor economics. Both are also engaged in ongoing projects which will need to be kept up while they are out of the country. Maggie is co-writing a book on the history of labor economics with Bruce, a new person in the history department. Bruce is counting on this book to help him secure tenure. Joe is part of a commission appointed by the state legislature to examine the feasibility of creating a single payer health care system for the state. The commission will continue meeting while he is gone, but he has asked to remain involved in the project in at least an advisory capacity.

The economics department advertises in the Chronicle of Higher Education for two one-year replacement faculty who will take over the Griffiths' classes while they are gone. In December both the Griffiths and the chairman of the department interview a number of candidates at the national Economics meeting. They hire two ABD's, explaining to them that there is no possibility of these positions being converted into tenure stream jobs. When Robert, one of the replacement faculty, asks about housing the Griffiths raise the possibility of his housesitting while they are gone. After some discussion about the cost of the monthly payments and what responsibilities it would entail, Robert agrees to live in the house. He points out though that he will not be able to move in until three weeks after the Griffiths have all left for Thailand. The Griffiths ask their neighbor Sam to watch over the house in the interim. They have also asked Sam to take in the family dog, Thorstin, for the duration of the sabbatical. A few months before he leaves Joe has a lengthy discussion with Gary, the family accountant. Gary and Joe discuss various investment strategies for the coming year, what documents Gary will need the Griffiths to save for tax

purposes, and how much leeway he will have to pursue unexpected investment opportunities.

Maggie arranges with the family physician, Frances, to conduct a thorough physical on each family member and start each on the necessary regimen of shots. Maggie asks Frances to assess the general health situation in Thailand; what sorts of diseases should they be aware of? How prevalent is HIV in the population? Is the blood supply safe? How should they go about finding a doctor for their time there? What is the status of the water supply? Frances utilizes a number of sources in her researches, including the state university's Institute on International Health, the World Health Organization, UNICEF, and the International Red Cross.

Joe leaves two months earlier than Maggie in order to find suitable housing, begin his job, select a school for the children, and generally get a feel for the city. Most of his new colleagues have lived in Thailand for many years and are generous with their advice. Several of them explain that if he and his family are only going to be here for a short time he should hire a driver to help him through the maze of Bangkok. He interviews a variety of applicants and hires a chauffeur, Su Chat. He explains to Su Chat that part of his duties will entail keeping an eye on Ken, his son, who has never lived in a big city, as well as making sure that the whole family learns the safe and unsafe sections of town. Before Joe accepted the position he had contacted the American embassy in Bangkok for their assessment of political situation. He had explained that he needed to be sure the country was stable enough to risk bringing his family. He was reassured by Anne, an aide to the ambassador, that even though there was an attempted coup three years ago, there is little chance of any serious trouble.

A few days before Maggie and the kids are scheduled to leave, Maggie is asked to be a last minute replacement for the main speaker at an extremely important conference in New York. She calls her sister, Sue, who lives an hour away, to ask if she will look after the children for the next couple of days. They both agree that this will work out well since the airport Maggie and the kids are scheduled to depart from is in Sue's town. When Maggie returns Sue can simply drive her and the kids to the airport, and Sue will keep the car for the duration of the sabbatical. Maggie helps the children unpack and leaves with Sue to catch her flight. As they drive out to the airport, Sue asks Maggie if she would do her a favor while in New York. She tells Maggie that if she comes across any interesting art prints or compact discs she would

appreciate it if Maggie would buy her some, and she could reimburse her later. They discuss the sorts of painters and music Sue has been interested in lately, as well as the general price range, to give Maggie a rough idea of what to look for.

Sue lets 10-year-old Ken stay up past his usual bedtime, orders pizza for dinner two nights in a row, allows 17-year-old Maria an after-dinner glass of wine, and rents several movies to amuse the children while she catches up on some work from her office. On Saturday night Sue and Maria stay up late into the morning talking about their respective relationships. Sue tells Maria what she thinks of the choice she and her boyfriend, Marc, have made to remain committed to each other. They have agreed to each remain celibate while Maria is in Thailand, but they can date other people. On Sunday Ken, while playing a game of street football, picks up a number of scrapes and twists his ankle slightly. Sue looks Ken over, puts some antiseptic on the cuts, and takes him to a Redi-Care where a nurse practitioner examines him. The NP sees no need for any further treatment, only telling Ken to keep off the ankle as much as possible for the next twenty-four hours.

Meanwhile, Maggie gives her speech. During the follow up question and answer period she makes reference to some unpublished work that she and her co-author have recently completed that has some bearing on what an audience member has asked. Later that night she has dinner with Scott, an old friend of hers from graduate school who teaches at another, less prestigious school. They talk about the conference, particularly whether she should spend much time turning her presentation into a publication. Maggie is especially interested whether Scott thinks she would have a better chance at being accepted by one of the top journals if she included the unpublished material she referred to in the question and answer section. Scott says that if she'll send him the full draft of the paper, as well as the unpublished material, he'll look it over. They discuss Scott's frustration with his present position, and they conclude that with a few more publications he might be able to find a better job elsewhere.

Maggie then spends the next day sightseeing and browsing for music and art for her sister. She comes across a print which she believes Sue would want very much although it is substantially above the agreed upon price range. Unable to reach Sue by phone, Marge decides to go ahead and purchase it. Upon leaving the gallery she finds she is uncertain which bus she should take to the airport. She asks a

man in a suit holding a briefcase who appears to be waiting for a bus the quickest way to Kennedy airport. He gives her the correct directions and Maggie gets on her return flight.

Sue leaves Maria to watch Ken and drives out to the airport to pick up Maggie. Two days later Sue drives Maggie, Ken, and Maria all out to the airport, and they board the flight to Hawaii where they will make their connection to Hong Kong. From Hong Kong they fly on to Bangkok where they are met by Joe who then drives them to their new home.

Section I: Why study trust?

Importance of trust in daily life

If the above narrative seems a trifle dull, it has partially served its purpose. One way to see the importance and pervasiveness of trust is to take the normal ebb and flow of life and consider how much of it involves some form of trusting. Although the Griffiths are about to dramatically alter their lives for a year, nothing particularly dramatic happens. No one is murdered, no one lies to anyone else, no one cheats anyone else out of money, no one has an affair, people behave decently towards each other. Yet the characters are not sitting quietly and safely in their rooms, disengaged from the world. They serve on legislative commissions, plan overseas trips, fly to New York, play football with friends, write articles, deliver papers, take on new jobs, etc. Over and over again the characters in the narrative trust each other in a wide variety of ways. Why so many complex, multi-partied events take place is due in large part to the success of such trusting. Trust is a necessary condition for allowing the Griffiths to lead such active and interesting lives. Whether or not someone merely *depends upon* another as opposed to *trusting* them will turn out to be a difference of some import, but I cannot address it here. A detailed definition of trust distinguishing it from related, but importantly different notions like faith, dependence, and reliance, will be introduced and defended in Chapter Two.

Assuming though that all the characters mentioned are genuinely trusting each other, we can list the some of the varieties of trusting taking place in this brief narrative:

Maggie and Joe are trusting each other: To be maritally faithful to each other before Maggie and the kids fly over to join him.

Maggie, Ken, and Maria are trusting Joe: To pick out a pleasant, comfortable, safe house which will fit within their budget. The children are also trusting Joe to select a decent school which will challenge them and not be too much of a culture shock.

Joe is trusting Maggie: To care for the children, keep them healthy and safe and continue the counseling, nurturing, supportive activities which will help them to grow up happy and fulfilled.

Maggie is trusting Bruce, her co-author: To continue working on the book and correspond regularly with her.

Joe is trusting his fellow commission members: To continue gathering the necessary data for the report and to make sure he is kept up to date.

Joe and Maggie are trusting Robert: To maintain the house and to deal with any accidents which may occur.

They are also trusting Robert to notify them if any large scale disasters arise that might require their personal attention.

Maria and Marc are trusting each other: To adhere to the bargain they made to remain celibate even though they may each date other people.

The Griffiths are trusting Sam, their neighbor: To care for their dog as well as watch over the house until Robert moves in.

Maggie is trusting Sue: To keep her children safe for the weekend and to contact her if anything serious happens. She is also trusting Sue will reimburse her for any C.D.'s or prints she purchases.

Maggie is trusting Frances, the physician: To do an accurate diagnosis of the family's physical health, to administer the regimen of shots in a professional manner, and to help her know what to expect in Thailand.

Sue is trusting Maggie: To use her good judgment to pick out music and art work in New York and to stay within the agreed upon budget.

Maggie is trusting Sue: To accept her judgment that if she sees something extra special out of the price range Sue mentioned and yet Maggie is confident that Sue would love it, the two of them will work out an equitable means of handling the situation.

Joe is trusting Gary: To watch over the family accounts, make wise investments, and handle the taxes.

Maggie is trusting Scott: About his opinion of the speech and its prospects. She will also be trusting him not to plagiarize her work if she does indeed send him some of the unpublished material.

Ken and Maria are trusting Aunt Sue: To treat them decently, and not abuse them physically or mentally in the absence of their parents.

Joe is trusting his new colleagues: To give him good advice on the schools, restaurants, places to live.

And so on.

It is also interesting to note the diversity of trusting taking place. The nature of the relationships between the trusting parties varies tremendously. Friends, family members, lovers, colleagues, strangers are all trusting each other with regard to a wide range of items. Sometimes the characters are trusting each other *with* the care of a person or a thing: children, money, houses. Sometimes they are trusting each other *for or about* something: directions, editorial opinions, political advice. Sometimes the trusting is reciprocal, sometimes it is one-sided. Sometimes the people are very conscious they are trusting another, and sometimes it is so implicit in the nature of the relationship that neither party is even aware of how much has been passed between them.

It might be argued that while nothing untoward happens to the Griffiths, this is hardly a normal month

in anyone's life; far too many momentous events are taking place in the Griffiths' lives. So while trust may be clearly involved in these sorts of scenarios it is hardly as important in daily life as the narrative would indicate. However, any of us can conduct a similar sort of inquiry by taking the a mundane two week period of life and looking for moments when we are either explicitly or implicitly trusting someone else. A baby-sitter, a teacher's evaluation of a child's performance, a magazine article on the potential success of a political nominee, a car mechanic's explanation of what is wrong with the car, a friend loaning a pair of gardening shears. Any of these interactions is the occasion for trust. Trust plays a significant role in innumerable relationships ranging from the trivial to the highly consequential.

What does seem to be true is that the more removed from social interaction a person is, the less significant a factor trust is in his/her life. Trust is primarily a social phenomenon, one of consequence only to those who engage in relationships with other people. A hermit in a cave does not need to worry about trusting (although bad experiences with trust may have been the primary reason for becoming a hermit in the first place).

The absence or destruction of trust points to its importance

As lies spread--by imitation, or in retaliation, or to forestall suspected deception--trust is damaged. Yet trust is a social good to be protected just as much as the air we breathe or the water we drink. When it is damaged, that community as a whole suffers; and when it is destroyed, societies falter and collapse.¹

Annette Baier, in her important essay, "Trust and Anti-Trust," points out that since trust is so pervasive we are most likely to notice it only when it has broken down. It is only after we have been let down or betrayed that we realize we were even trusting at all.² Therefore, another way to see the significance of trust is by looking for situations where the loss of trust has been raised as a serious issue. For instance, consider some possible ways to spice up the narrative: Joe cheats on Maggie in Thailand, Maggie's friend lies to her about her speech because he is jealous, Aunt Sue abuses the children, Gary embezzles all the funds from the family, Joe's colleagues use his ideas and then neglect to include his name when they publish their report. The inherent dramatic possibilities of such scenarios are the direct result of the destruction or violation of trust.

This is hardly surprising since trust shows up constantly as a central theme in literature, theater, and cinema. Many of Shakespeare's plays revolve around issues of misplaced trust, foolish trust, betrayal of trust, unjustified trust, and trust rewarded or denied. Macbeth assassinates King Duncan who believes him a trustworthy subject; Desdemona is killed because Iago manipulates Othello to think she has betrayed him; Lear is convinced he has been betrayed by Cordelia; Richard III plays upon the trust of everyone around him and betrays almost everyone he encounters. In his book, **Frames of Deceit**, Peter Johnson has a fascinating examination of the intersection between political and personal trust in Sophocles's **Philoctetes**. The outcome of the Trojan War depends upon the successful betrayal of Philoctetes who is marooned as the result of an earlier betrayal.³ David Mamet's **Oleanna** asks the audience to decide whether or not the teacher has betrayed the trust of the student who comes to see him in Act I.

In Jane Austen's **Pride and Prejudice** Elizabeth Bennet begins by trusting Mr. Wickham and not Mr. Darcy, only to eventually learn that the former is a villain who almost destroys her family. In Josephine Hart's novel **Damage** a man's ongoing affair with his son's fiancée ultimately results in the death of his son and the destruction of his own career and marriage. Madame Bovary betrays her husband and is in turn betrayed by her lover; the reader must decide whether either character was ever worthy of trust to begin with. Much of the evil of Orwell's **1984** stems from the fact that it is impossible to trust anyone in that world since anyone might be an agent of Big Brother. This is why the private and intimate relationship between Winston Smith and Julia is so poignant. In Nikos Kazantzakis's novel **The Last Temptation of Christ** Jesus must trust Judas to betray him in order for God's plan to be carried out.

Francis Ford Coppola's **Godfather** trilogy is filled with occasions in which trust becomes the central issue. In the first film Sonny Corleone is set up for his execution by his brother-in-law, and an old family friend later tries to do the same thing to Michael. In the second film Michael Corleone is betrayed by his brother who feels he has been betrayed by the family. In each case these violations of trust result in death and suffering for everyone concerned. The film **Thelma and Louise** includes several crucial episodes where the trust the two women have in each other causes them to make a specific decision. What happens is then all the more dramatic when contrasted with their unwillingness to trust the law and its representatives. Even simple

cinematic thrillers like **Basic Instinct** and **Single White Female** depend upon achieving their emotional effects by challenging the audience to figure out, "Who here can be trusted?"

These examples from the art world reflect the frequency and magnitude of our encounters in the real world with the problems of broken or absent trust. If we look for them, we are quickly overwhelmed by examples of significant societal changes that result from the loss of trust in the realms of politics, medicine, teaching, law, as well as relationships between individuals of different genders, races, sexual orientations, and generations. Whether or not these societal transformations are ultimately good or bad is a separate question deserving intensive study. What is far less controversial, however, is the fact that a deterioration or weakening of trust changes the substance and style of human interaction.

For example, trust has become an increasingly prominent issue in politics. In the closing months of the 1992 presidential election President Bush settled on his theme to attack, then-governor, Bill Clinton's lead in the polls: "Trust and Taxes." Clinton couldn't be trusted about anything he said he had done or about anything he was going to do. This was a deliberate and effective strategy on the part of the Bush campaign staff. It had initially been recommended to them by political advisors of British Prime Minister John Major who had recently utilized it to defeat a challenge from the Labor party. Questions about trust were not directed solely toward Clinton though. Bush's own "trust factor" became a major campaign issue, stemming in part from his decision to raise taxes after explicitly promising not to in the 1988 election, as well as damaging evidence regarding the truthfulness of his explanation of his role in the Iran-Contra scandal. Professional pollsters on both sides spent hundreds of hours and thousands of dollars trying to determine the extent to which voters trusted Clinton or Bush and which of them had the biggest problems with the "trust factor." Numerous polls indicated a lack of trust on the part of citizens with the political process and the members of congress. This lack of trust with both the conventional political parties created the groundswell of support for a third party.

Looking closely at professions such as teaching and medicine provides a wide range of examples of issues that turn on seeing the pivotal role of trust. Universities and colleges in the past ten years have created a host of new policies and regulations governing the behavior of students and faculty that are the result of a breakdown of trust. Many schools forbid teachers from dating students taking courses in their department or in

their classes. Some schools have prohibited faculty and students from dating at all. Clearly these regulations arise in large part from a belief that teachers cannot be trusted to refrain from abusing their power over students. In even more mundane matters schools are introducing new policies to deal with the loss of trust. For instance, some schools make it a requirement for their faculty to issue syllabi for their courses. Students can use these as a basis for filing a grievance with the institution's ombudsman if the professor fails to adhere to it. This policy has arisen because of students' distrust that teachers will act in a non-capricious fashion about grades, tests, paper requirements, reading loads, and evaluations.

In medicine there are hundreds of thousands of people who will not trust mainstream medical practitioners with even basic treatment. Each year millions of dollars are spent on alternative health care.⁴ Every bookstore carries bestsellers by writers such as Deepak Chopra who argue that mainstream medicine is misguided in a number of fundamental aspects.⁵ For many minorities this skepticism of the competency of the medical community is combined with a belief that mainstream medicine is racist. African Americans are less likely to donate kidneys than whites in good part because they fear their organs may be taken from them before they are dead. They refuse to sign Advance Directives in large part because of a fear that this will cause the medical community to curtail life-saving treatment if they need it.⁶ A number of African Americans believe that both the push for family planning and the advent of AIDS are part of a conspiracy between the medical community and the government to eradicate them.⁷

Several leading members of the disabled community are fighting against "right to die" and advance directive legislation. They argue that this legislation is simply one step down the road to increased bigotry and marginalization. They do not trust the philosophical proponents of autonomy/freedom of choice. In their eyes, right to die advocates are simply laying conceptual, moral, and legal groundwork that will later be used to rid society of "non-productive" persons. This mistrust has caused serious problems in the dissemination of medical technology such as genetic screening as well as creating problems for legislation designed to promoting further access to health care. The state of Oregon's 1990 program for increasing Medicare access to everyone below the poverty line was initially challenged and stopped by leaders in the disabled community. They went to court to challenge the state's process for establishing priorities for what services would be provided, arguing that the state's methods were potentially discriminatory to the handicapped.

Within the medical field itself mistrust is a constant issue. We frequently hear claims that doctors don't trust nurses, administrators don't trust the staff, and nurses don't trust the doctors. As a result of this distrust there is frequently a restriction on the autonomy of practitioners, both in deciding how to structure the health care system as a whole and within the institutions as they presently exist. In the AMA's 1993 conference in New Orleans the governing body once again reiterated its strong objections to nurse practitioners being allowed to set up individual practices away from the oversight of a certified M.D. Within hospitals, detailed policy guidelines are often created in order to regulate the behavior of everyone involved. Frequently the guidelines entail restricting an individual health care provider's discretionary powers to deal with a problem on the spot as people become afraid to deviate from the regimen in any way. Regimented care becomes more and more commonplace for both patients and health care providers, thereby resulting in a impersonal and cold health care system. Some philosophers have urged that the traditional idea of an "ethics of trust" as integral to the professional client relationship is incoherent and dangerous and should be replaced with a different view, an "ethic of distrust."⁸ These writers claim this is especially so when it comes to understanding the doctor/patient relationship.

These are just some of the many issues of distrust and trust that affect everyone on a daily basis. It would be easy to create an even larger list, but this should suffice as a beginning. It is not hard to see that there are similar sorts of issues involving trust in business, religion, the military, the arts, science, personal relationships, psychology, education, and politics.

Important theoretical questions about trust

In investigating the practical ramifications of trust we are inevitably led to a plethora of intriguing theoretical questions. Some of the questions that follow will be addressed in the dissertation but, as will quickly become apparent, there are enough issues here for many such inquiries.

To begin with, there is the problem of trying to construct a definition of trust. Bernard Barber, a leading writer on the topic, has pointed out that this definitional unclarity is more than a mere semantic problem. He contends that the confusion surrounding what is meant by the term makes most of the surveys purporting to measure trust misleading or worthless.⁹ Are 'trust,' 'dependence,' 'faith,' 'confidence,' and

'reliance' different words for the same phenomenon? Is the definition for one the same for all? If there are important differences between these terms, then they need to be clearly expressed. This will be further complicated by the fact that it is unlikely there is one particular kind of trusting relationship that can serve a paradigm example. Trust between lovers, between siblings, between friends, between professionals and their clients are each important, but no one kind is obviously the key to understanding trust.

People constantly use phrases like, "You can trust Toyota" or "You should never trust the government." However, 'Toyota' and 'the government' refer not to specific individuals but to collections of individuals. This immediately raises the question of whether it makes sense to talk about trusting an organized collection of people. Is trusting an institution or profession or organization, such as the doctors or teachers or the government or Ford, the same sort of thing as trusting an individual? It may be that it is simply a misleading use of the term to say, "I trust the Democrats more than I trust the Republicans." For strict clarity some other term entirely, like "confidence" or "faith", may be required. Do any collectives have the necessary features that would allow one to talk sensibly about trusting them? Moreover, this is complicated by the fact that there are an enormous variety of collectives ranging from business organizations to professions to cultures to clubs to government systems.

Does a society require widespread trust among its citizens in order to ensure its survival? Where there is widespread distrust among the citizenry is it possible to establish a democratic government or a flourishing economy? Perhaps it is possible to have a thriving society with citizens who distrust each other so long as they trust certain critical social institutions (e.g., banking, police, the legislature, the President). Or it may be that it is impossible to create and sustain a modern capitalist, democratic society without widespread trust. In any case, understanding the interrelationship between trust in large social and economic institutions and the level of interpersonal trust among the citizenry matters a great deal. Governments may need to learn how to promote trust among their citizenry in order to be able to follow through on their duties and responsibilities to the public. It may turn out that some forms of economic or political systems inevitably generate a deterioration of trust among participants.

There are epistemological questions regarding the nature of trust. Some writers have claimed that the notion of unconscious trust makes no sense. Others maintain that unconscious trust is the most prevalent kind

there is. Must trust always involve a conscious decision or awareness on the part of the one trusting?¹⁰ Trust always carries with it the possibility of disappointment and betrayal. Knowing this, we must determine what is means to sensibly trust someone and how this is separated from simple gullibility or foolishness. An adequate response to such questions will entail constructing criteria to distinguish between those people who have good grounds to trust and those who are trusting blindly. Can trust be a purely intellectual conscious decision with no emotional content or is it primarily an emotional response to people and situations? Perhaps trust is something of which the contrast between sensible and foolish does not make any sense. What is the distinction between trust that was merely disappointed and that which has been betrayed?

Children, opinions, directions, jewelry, houses, careers, politics, medical diagnoses, human life, are all different as can be, and yet all have been spoken of as objects of trusting relationships. Simply figuring out what can be entrusted from one person to another is an enormous challenge. It would be helpful to know whether we can transfer the trust someone has for us to another party. Are there some relationships where the duties imposed by trust can never be relinquished? It may turn out that the difference between trusting someone "about" something as opposed to trusting them "with" something is a critical distinction. Frequently people are asked to trust each other about actions that took place before they knew each other. Becoming clear on what it means to trust someone about claims in the past will involve investigating the relationship between truth claims and trust.

There are important ethical questions about trust. Annette Baier has written about what exactly constitutes morally acceptable trust relationships.¹¹ Is her analysis adequate for all trusting or will it work for only certain kinds of trust relationships? Some have claimed that trust is a *prima facie* good, while other maintain its moral status depends on the moral qualities of the relationship in which it is embedded. What should we think of spying which depends upon the intentional fostering of trust with the explicit goal of violating that trust. Answering this depends upon determining if betrayal is always a bad thing or whether there are times when betrayal is courageous and virtuous. Is trust something we must work at to deserve or should we all be trusted until we do something that demonstrates our untrustworthiness? To what extent is it fair for businesses to manipulate and mislead people who may trust them? Does trust always have moral overtones or can there be trust relationships which have no ethical ramifications? Some professional

occupations automatically carry with them certain expectations of trust that are supposed to be part of the moral virtues of the professional role. It may be the case that this relies on an inadequate and dated understanding of what it means to be a professional. Is it a sign of an immoral prejudice if we are incapable of trusting certain kinds of people?

Related to such ethical considerations are numerous social/political questions. Should the most vulnerable in society ever trust those in power? When is trust a necessary political strategy? Should women adopt a general attitude toward men of "distrust until proven otherwise?" In what ways does management utilize the distrust various factions may have for each other, (e.g., working class whites and blacks) to split organized labor? Is trust toward government something that should be actively promoted and nurtured in society or is the public better off with a general tendency to distrust any government plan?

This is only a sample of the large number of intriguing questions about trust that merit serious consideration. Furthermore, there is a great deal of interplay between these philosophical questions and related questions in fields such as psychology, sociology, and political science. How do we go about constructing instruments for measuring trust? Can surveys capture the concept adequately? What are the general sources of distrust? Are some groups of people generally more trusting? If so, what factors contribute to this tendency to trust? What are the means for facilitating trust or for promoting it within relationships, citizens, and nations? What is the relationship between trust and self-esteem, self-reliance and interdependence? What is the role of communication in trust? Is it the case that the more people understand each other's motivations and history the more likely trust will develop? What is the history of societies in which there has been a lack of trust of its basic institutions? The possibilities for important interdisciplinary work are enormous.

Section II: What has been done and what needs to be done

What has been written about trust?

This abundance of difficult, substantive problems at both the practical and theoretical level should make trust a topic of great interest to philosophers. When we consider the vast amount of literature generated on subjects of a similar nature such as equality or justice it would seem reasonable that there would be a

similar body of literature on the topic of trust. There should be a number of different schools representing long traditions of thought about the subject. It seems as though there ought to be forums, colloquia, conferences, special issues of **Philosophy & Public Affairs**, and so on.

However, this is decidedly not the case. Historically, the most extensive philosophical discussions of trust have taken place within a religious framework by such thinkers as Augustine and Aquinas. Not surprisingly many of these writings focus on the question of the role of faith and trust in the relationship between man and God. Such discussions, while of immense significance within philosophy of religion, are hard to successfully transplant from their religious context. There are some secular philosophers such as Plato, Aristotle, Machiavelli, Hume, and Locke, who may passingly write about trust. Yet, even then they generally do so within the context of another problem they are addressing. Plato, Locke, Machiavelli, are all primarily concerned with trust's role in political theory. Aristotle, in as much as he can be interpreted as discussing trust, writes about its role in interpersonal relationships. No one in the history of philosophy has undertaken a sustained examination of trust.

Trust has not fared much better in the twentieth century. Although a number of contemporary philosophers might mention trust as an afterthought there are only three philosophers--Annette Baier, Trudy Govier, and Laurence Thomas--whose work regularly and explicitly addresses the subject. There are only two collections of essays on the topic; one edited by sociologist Diego Gambetta and another by Robert Veatch, Edmund Pellegrino and John Langan. Sociologists Bernard Barber, and Niklas Luhman, as well as political philosopher Peter Johnson have each written a full length book on trust as it plays out in their respective fields. There are other philosophers who recognize the importance of the topic. Judith Shklar in **Ordinary Vices**, and Sissela Bok in **Lying**, examine the topic with sensitivity and seriousness, but both of their books are largely devoted to other questions. While the 1980's and 1990's have seen a decided increase in the number of articles written on the topic, it is still small in proportion to the subject's importance.¹²

Since, as I will show, trust is a genuinely profound and significant topic, it is puzzling as to why there is such a dearth of material on it. In **Moral Prejudices** Annette Baier proposes the following reason for this want of attention.¹³ In her judgment moral philosophers have thus far largely ignored trust because of a

fascination with contract and its various manifestations. She contends that there is a direct relationship between the fixation on contract and the historical fact that most moral philosophers have been male. Her claim is that for these philosophers the ideal of how interpersonal relationships should be construed is based, not surprisingly, on the nature of their own interactions with their fellow men. Everyone in their immediate circle has roughly equal access to power and shares a strong desire to be let alone to do their work. Since a contract allows one to regulate the nature of one's contact with others and such devices are most successful among people of roughly equivalent power status, this focus on contract has been understandable, if somewhat narrow. It is a natural reaction from those who have a fair amount of control in how they will live their lives. Historically, this has been in sharp contrast to the disadvantaged in society, such as women and minorities, who seldom have had the luxury of such independence and control in their lives. Their relationships can not usually be so cleanly or neatly arranged to fit into a contractual scheme and so the question of whom one can trust is of greater significance.

Baier may have put her finger on a crucial reason why trust has been so long neglected, but there are at least three additional reasons. First, since trust is so pervasive, so intertwined in our lives, it is for that very reason hard to recognize as a worthy topic for a sustained and rigorous examination. It is utilized so frequently, like walking or driving a car, that we seldom scrutinize it, seldom even give it a second thought. It is so much a part of the social fabric of everyday life that, as was pointed out earlier, we are frequently not even aware we have been trusting. Sometimes this is made clear to us when we are forced to abandon an environment that was filled with trust and move to a new, unfamiliar situation; we move from our parents' comfortable house to a poor, rundown neighborhood. Often it is only after we had that trust violated or come to see that it had been misplaced that we understand the profound role trust plays in our lives. Our first great love may turn out to be a cheat and liar. Only when we have to think twice about it, when we encounter a similar situation and we are forced to consciously decide whether or not to trust again, do we become aware of the extent to which ordinary life involves trust.

Bernard Barber cites an interesting study in support of this view in his book **The Logic and Limits of Trust**.¹⁴ Sociologist Harold Garfinkle conducted a series of experiments he terms "breaching experiments."

In each version his students were instructed to act in ways that damaged trust between themselves and other people. They deliberately set out to doubt, question, and mistrust every statement made by their family, friends, and acquaintances. Not surprisingly, the experiments annoyed, frustrated, and infuriated the people who were being mistrusted. Perhaps more significant was that the experimenters found it was extremely difficult to even engage in this extensive and prolonged distrusting without becoming confused, depressed, and angry themselves. It was not until after they had gone through the experiments did they become aware of how much of their daily life was dependent upon such basic trust.

A second explanation is related somewhat to the first. Since almost everyone engages in some form of trusting in their daily lives, when people do think about trust they tend to assume that others know exactly what they mean. Therefore, people may have a proclivity to assume that trust is a phenomenon well understood by all concerned parties. It is only when asked to spell out exactly what is meant by the term that the conceptual confusion surrounding the term becomes evident. For example, four women who are all asked, "Do you trust your doctor?" may each say "Yes," and it would not be at all clear what that would reveal. One means that she believes her doctor will be completely honest with her, telling her the full truth about her condition. The second does not necessarily believe that the doctor will be candid, but she does trust the physician's clinical judgment and competence in dealing with her disease. The third believes in neither the physician's candor nor competence, but rather that the doctor's intense fear of being sued would prevent him/her from pulling the plug in the case of some terminal disease. The fourth may mean that if she contracts a terminal disease she believes the doctor would have the decency to disguise the fact rather than disclose the information about it which she feels would ruin her time left. These are very different types of expectations about the behavior of the doctor. Along with these differing expectations will be differing ranges of confidence, authority, and discretionary power being extended to the doctor. Yet since each woman is clear in her own mind in what she means it is not hard for each of them to think that she also knows what the others are referring to when making a similar claim. The very familiarity of trust to each of us blinds us to the complexities surrounding it, thereby impeding careful investigation.

A third reason why trust has been ignored is, like Baier's argument, historically based. Much of modern ethical theory has been an outgrowth of the enlightenment project exemplified by the works of Kant.

One of the central goals was to produce an abstract ethical theory in a non-pejorative sense of the term. For the enlightenment philosophers the goal was to provide a universal philosophy which provided moral guidance in all situations regardless of particular relationships and circumstances. Whether one was a father or a son or a landowner or a member of royalty, the essential moral demands on an individual's life were all the same. One result of this approach was that philosophers tended to focus on an ethic of strangers in which people were seen, for the purposes of morality, as identically as possible. Clearly, there are numerous exceptions to this approach, but both Kantians and utilitarians share this basic tenet.

Whatever the merits of such a project it is not surprising that the topic of trust does not figure very prominently in the writers who follow in it. Understanding trust depends on discerning a vast number of subtle differences in historical background, individual circumstances, and the differing relationships of those involved. There are several crucial distinctions between two gay lovers trusting each other as opposed to trust between an elderly mother and her grown daughter. The history of the relationship between the lovers, societal expectations that accompany certain roles like "daughter" and "mother," the future goals of the parties involved, the political and cultural context, and so on, all matter a great deal. Given the import of such factors it will be almost impossible to examine and evaluate the role trust plays if one is relying on a highly abstract philosophic framework.

So there are at least four reasons why trust has been largely ignored by the philosophic community: the male fixation on contract as a general model for relationships; the pervasiveness of trust blinding people to its importance; the familiarity with some form of the phenomenon leading to the mistaken belief that everyone is means the same thing by the term; and the abstract, impersonal nature of post-enlightenment ethical theory.

Outline for the dissertation

The account that follows starts by constructing a definition of trust and distinguishes trust from related, but importantly different, terms such as reliance, dependence, faith, and confidence. Chapter Three focuses on the question of whether or not it is possible to apply this idea to a collective; that is, whether it makes conceptual sense to say we can trust an organization or a profession. In this chapter I defend the claim that the use of the concept is coherent in such contexts as long as the collective possesses certain features. In

Chapter Four I construct a framework that allows one to explore some of the moral dimensions of trust. I explicate what features distinguish genuine trust violations from merely perceived ones and explore the destructive potential of trust violations. I conclude by proposing an approach for investigating trust and ethics that draws on the material in this chapter, as well as from the earlier chapters. Lastly, in the remaining two chapters I move from these more general questions about trust to specific questions about the role of trust within the fields of teaching and medicine. In Chapter Five I contend that, despite some arguments to the contrary, trust is critical for physician/patient relationships. I then briefly explore the potential and limitations of two different collectives in creating an atmosphere of trust within physician/patient relationships. Chapter Six follows a similar path in that I argue against the notion that we should reconceive of teacher/student relationships along contractual lines; rather, we should recognize that teaching is an activity that depends for its success upon trust. I then examine whether undergraduate students should trust universities and colleges with regard to their education. I conclude this chapter by presenting a set of suggestions that I believe will aid those teachers who are interested in taking the role of trust seriously in their classes.

Given the complexity of what is involved it is clear that not all of the issues surrounding trust can be examined within this dissertation. Nevertheless, perhaps simply conducting a sustained examination of trust will stimulate others to look seriously at other aspects of the topic. Annette Baier's 1986 article clearly sparked some interest among philosophers, as has the recent work by Trudy Govier and Laurence Thomas. The more work that is done on the topic and the more questions that can be identified, the more likely it will attract the attention that it merits.

ENDNOTES

1. Sissela Bok, **Lying: Moral Choice in Public and Private Life** (New York: Vintage Books, 1979), p. 28.
2. Annette Baier, "Trust and Antitrust," **Ethics**, 96 (January 1986): 231-260.
3. Peter Johnson, **Frames of Deceit: A study of the loss and recovery of public and private trust** (New York: Cambridge University Press, 1993).
4. Raymond Murray and Arthur Robel, "Physicians and Healers--Unwitting Partners in Health Care" **New England Journal of Medicine** Vol. 326 (January 1992): 61-64.
5. Cf. **Perfect Health: The Complete Mind/Body Guide**, (New York: Harmony Books, 1991); and **Quantum Healing: Exploring the Frontiers of Mind/Body Medicine** (New York: Bantam Books, 1989).
6. Cf. **African American Voices: African American Health Educators Speak Out** ed. Ruth Johnson, (New York: National League of Nursing Press, 1995).
7. Cf. Patricia Williams, **I Heard it through the Grapevine** (Berkeley: University of California Press, 1993).
8. Cf. Robert Veatch, "Is Trust of Professionals a Coherent Concept?" in **Ethics, Trust and the Professions: Philosophical and Cultural Aspects** ed. Edmund Pellegrino, Robert Veatch and John P. Langan (Georgetown University Press, 1991), pp. 159-167; and "Abandoning Informed Consent" in **Hastings Center Report** 25, no. 2 (March/April 1995): 5-12.
9. Bernard Barber, **The Logic and Limits of Trust** (New Brunswick, N.J.: Rutgers University Press, 1983).
10. Annette Baier contends in "Trust and Antitrust" in **Moral Prejudices** (London, England: Harvard University Press, 1994) that unconscious trust is quite common. On the other hand, Niklas Luhman, seems to claim that trust requires a conscious awareness of the risks and benefits entailed by an act of trusting. See especially his essay, "Familiarity, Confidence, Trust: Problems and Alternatives" **Trust: Making and Breaking Cooperative Relations**, ed. Diego Gambetta (New York: Basil Blackwell, 1988).
11. Cf. **Moral Prejudices**, especially chapters 6-9.
12. Laurence Thomas, **Living Morally: A Psychology of Moral Character**, (Philadelphia, Penn.: Temple University Press, 1989); Sissela Bok, **Lying: Moral Choice in Public and Private Life**, (New York: Vintage Books, 1979); Peter Johnson, **Frames of Deceit: A study of the loss and recovery of public and private trust** (New York: Cambridge University Press, 1993); Bernard Barber, **The Logic and Limits of Trust**, (New Brunswick, N.J.: Rutgers University Press, 1983); Niklas Luhman, **Trust and Power** (New York: Wiley, 1979); Judith Shklar, **Ordinary Vices** (Cambridge, Mass.: Belknap Press of the Harvard University Press, 1984); Annette Baier, **Moral Prejudices: Essays on Ethics**, (Cambridge, Mass.: Harvard University Press, 1994) especially chapters 6-9;; Trudy Govier, "An Epistemology of Trust," **International Journal of Moral and Social Studies**, 8 (Summer 1993): 155-174; and "Self-Trust, Autonomy and Self-Esteem," **Hypatia**, 8 (Winter 1993): pp. 99-117; and "Trust, Distrust, and Feminist Theory," **Hypatia**, 7 (Winter 1992): p. 16-33; **Ethics, Trust and the Professions: Philosophical and Cultural Aspects**, ed. Edmund Pellegrino, Robert Veatch and John P. Langan, (Washington D.C., Georgetown University Press, 1991); **Trust: Making and Breaking Cooperative Relations**, ed. Diego Gambetta (New York: Basil Blackwell, 1988).

13. This view is most explicitly expressed in "Trust and Antitrust" in **Moral Prejudices**, but she returns to this theme frequently throughout the rest of her writings on the subject.

14. Bernard Barber, **The Logic and Limits of Trust**, p. 11-14. The study he cites is: Harold Garfinkel, "A Conception of, and Experiments With, Trust as a Condition of Stable Concerted Actions," in **Motivation and Social Interaction: Cognitive Determinants**, ed. O.J. Harvey (New York: Ronald Press, 1963): pp. 187-238.

CHAPTER TWO

THE CONCEPT OF TRUST

Introduction

The primary goal of the first chapter was to illustrate the importance of trust and discuss some possible reasons for its neglect as a topic of serious philosophical inquiry. The purpose of this chapter is to analyze the concept of trust and then briefly consider why trust matters to us. I begin by examining the various trust relationships in the introductory narrative for shared features. In doing so I distinguish the notion of dependence from those of trust and reliance. I then identify seven different features that trust and reliance have in common: dependence on another, vulnerability arising from that dependence, confident expectations about the outcome of the relationship, a certain degree of discretionary power, disposition to submit this discretionary power to another, a belief in the competence of the other, and an object of trust. I then argue that these alone do not capture all of the most significant aspects of trust and that we must further include what I call a good will condition. This allows us to distinguish trust from reliance and faith and also helps us to understand some of the reasons why trust is so important to us.¹

Chapter Three will then take the definition of trust to be worked out in this chapter and consider whether or not it makes sense to say we can trust a collective of people, specifically organizations and professions. While the conclusion reached there is that such a move is plausible, the issue is extremely difficult and complex. Clearly, it cannot be dealt with before the more fundamental issue of defining trust is addressed. Therefore, for the purposes of this present chapter no examples of individuals trusting collectives will be utilized.

Section I: Dependence, reliance, and trust

"depending" and "vulnerability"

One common theme of the relationships in the narrative is that many of the characters are *depending* in some way on others. When we depend on someone else it means that this other person has the authority or power to make decisions and take actions in ways that will effect us. Maggie is depending on Joe to find

affordable, comfortable living quarters. In doing so Joe, not Maggie, is the one who will make the decisions concerning next year's housing. Joe is depending on Maggie to care for the children. It is Maggie, not Joe, who will be making decisions about the children's homework, chores, health care, social life, etc. By taking the children to see Frances, the doctor, Maggie is depending upon her to make knowledgeable decisions and recommendations about their health. At this moment it is Frances who will give her opinion, not Maggie, about which shots are needed, what constitutes a health hazard in Thailand, and what sorts of precautions have to be taken. If Maggie is genuinely perplexed about what to do with her paper, then she is giving Scott some power when she seeks his advice. She is setting aside her own opinions of the paper for the moment and allowing Scott to assess it. Scott, not Maggie, will be deciding what is vague or good or unclear or exciting about the paper.

Where there is dependency there is usually some degree of *vulnerability*. By vulnerability I simply mean that there is some risk of an unsatisfactory outcome for us if the people we are depending on fail in their task or assignments. If Joe is lazy and waits until the last minute to search for a house, the family may have to live in a small, overpriced place. Part of the risk that Maggie and the children run in depending upon Joe is that they may have to spend a year in cramped quarters with much less money than originally anticipated. If Maggie puts off taking the children to the doctor, Ken and Maria run the risk of contracting any number of diseases in Thailand. The extent or depth of our vulnerability is determined in large measure by the extent of the other's discretionary power or authority, as well as the value of the object/task over which they are exercising control.

Some might argue that an unsatisfactory outcome is not the inevitable result of such a failure. Suppose Joe and Maggie go out for an evening and leave the children in charge of the house. Maria and Ken engage in a game of high speed tag and chase each other through the house. During this game Ken knocks over a vase causing it to shatter. Clearly the children have failed in the task their parents had charged them with. However, when the parents return that evening and are informed of what happened, Joe and Maggie confess that they had always secretly despised the vase. Moreover, it turns out that Maria and Ken also loathed the vase. No one had said anything because each person thought that the other family members were fond of it. Everyone is glad that the vase is gone and it might have remained there for years if the children hadn't

disobeyed their parents. In this case it would seem that there is positive outcome resulting from the failure on the part of the dependent parties.

While it is true there might be a short term benefit from the loss of the vase, there is damage of another kind. The fact that it was the vase that was broken, not the stereo or the T.V., or that one of the children was not injured, was more a matter of good fortune than anything else. Maria and Ken have given Maggie and Joe evidence that they may not be counted on in future situations to be on their own. Each interpersonal relationship provides some evidence or data for judging what to do in future similar circumstances. Whenever a dependence relationship fails in such a fashion, it creates a sense of insecurity in the dependent party about the future outcome of a similar scenario. If people have enough such disappointing incidents they may become withdrawn, reluctant to interact with others, obsessed with controlling whatever situation they are in.²

"trust objects"

In the narrative the trusting relationships are always about or concerned with something. Trusting involves a relationship between two or more parties with regard to something else. There is always some *trust object* in the relationship. Although the term "trust object" is awkward, it is meant to function as a short hand for the even more awkward "that which is entrusted to another" or "that with which the trusting relationship is concerned." This trust object is usually something which is of value to the truster. It may be valued instrumentally: as a secret about one's past might be important because of what would happen if other people learned of it. Or it may be something which has intrinsic value, such as one's children. There is a great deal of variety in what might constitute a trust object. It might be an inanimate thing. The Griffiths trust both Sam and Robert with their house. It could just as easily be a car or jewelry or a guitar or a book or a shirt. The trust object may be a living creature. Maggie trusts the children to Sue's care while she is in New York. The Griffiths trust Sam with the dog while they are on sabbatical. However, the trust object need not be something which can be felt or seen. Often it involves intangible, though no less important, items of concern. For instance, the trust object might be a bit of information. Sue and Maria trust each other with secrets and details about their lives. Ken and Maria tell their doctor Frances about their aches and pains, and Maria tells her about

her sexual activities. Maggie tells Scott about the conclusions she and her co-author have reached from the unpublished data. There is still a vulnerability there just as in the case of a more corporeal trust object.

The above examples, both in the tangible and intangible cases, share a similarity in that the truster is trusting the other with a trust object. In those situations we hand over or turn over control of something in our possession to the trusted party. However, in some circumstances we request something from the trusted party which is already in the control of the latter. In such cases we are trusting another about something. When Maggie trusts the man at the bus stop the trust object is with regard to the directions to the airport. Joe's trust of the ambassador's assistant is with regard to the accuracy of her information about the political conditions in Thailand.

We may also trust someone to do something, to engage in a particular activity. This is somewhat complicated in that whenever we trust someone with or about something we are also trusting them to do something as well. In asking Sue to take her kids for the weekend, Maggie expects that Sue will be doing a whole range of actions: feeding them, giving them a place to sleep, and watching over them. Trusting Robert with the house presumes he will do whole set of tasks, jobs, chores, etc. While this is certainly true, it will be helpful to make a distinction between situations like those and instances where the trust object may be a skill or talent which we ask the trusted to exercise on our behalf. Partly, the difference lies in the domain of the trusted party's authority or power. When we trust others with something, we are giving them authority or power over that item directly. This is not necessarily the case when the trust object is some skill or task.

For example, when Maggie trusts Scott to look over her manuscript she is not trusting him with the manuscript except in the most trivial sense. Certainly he could burn it or shred it, but these sheafs of paper are not what is at stake. What is being trusted is Scott's judgment, his editorial skills. When Maggie brings the children to Frances for a check up it is Frances's knowledge and diagnostic skills that are the trust object. Frances is not being trusted with the children, she is not being given power over them. The powers she is being granted are to conduct a diagnosis, make medical recommendations, to use her judgment about the safety conditions in Thailand. These various ways of trusting, with/over/about are not mutually exclusive; they can overlap and intertwine in a number of interesting ways.

Some might argue that trust need not always have an object. People often say, "I trust so and so"

without specifying what it is in particular that they are trusting the other party with or about. However, when such a statement is more closely examined it can be understood in one of three ways: (1) it is an incomplete statement, (2) the trust object is to be determined by the context of the discussion, (3) it is synonymous with the notion of trustworthiness or competency. For example, take the statement, "Maggie trusts Joe." Without there being something which Maggie is trusting Joe about or with or regarding, it is an incomplete statement. It is hard to know how to interpret such a declaration in a way that would make sense to us. It is comparable to trying to interpret the statements "Maggie gives Joe" or "Maggie tells Joe." We want the speaker to continue and tell us what was given or told.

Generally, we take it that if we knew the background or context of the statement we could understand it. Of course, "Maggie trusts Joe," could mean a number of things depending upon the context in which it is uttered. Perhaps it is a reference to sexual fidelity: that Maggie trusts Joe not to be having affairs. Joe and Maggie are going to be separated a long time, and Maggie may be concerned with Joe not cheating on their marriage vows. However, this is only a guess. It might be that Maggie is talking about Joe's selection of a place for them to live or about his judgment as an economist. The point is that if we analyze the context of the statement usually we will find that there ~~is~~ a specific object of the trust.³

There is also a wider sense of the phrase "Maggie trusts Joe" which is roughly synonymous with trustworthiness or general competency. In such cases, Maggie is making a comment about Joe's overall capabilities or character. Maggie believes that there is a whole range of tasks, things, capacities, that Joe is capable of handling. Yet, while the range of trust objects may be vast, presumably even here there is an implicit limitation on the set, should we bother to seek it. Maggie would presumably not trust Joe with surgery on their children or with flying them on the space shuttle.

"confident expectations" and "dispositions"

Is it possible to stop here and say that trust is the same thing as dependency? On such an account to say "X trusts Y" is essentially equivalent to "X depends on Y." That is X, rather than Y, has the authority or power to make some decision or take some action about something of concern to Y. Furthermore, by being in this trust relationship Y is necessarily vulnerable to X to some extent. While trusting relationships do entail

both dependency and vulnerability, the expressions, "trust" and "depending" are not simply interchangeable.

For one thing, 'dependence', as I have been using it thus far, refers to a non-psychological state.⁴

When Maria was an infant she was dependent upon Maggie and Joe for even the most basic functions if she was to survive. There was no conscious choice involved in her actions. Moreover, this is not a condition which only applies to infants. If Ken had been hit by a car, instead of merely twisting his ankle, he would have had to depend upon the paramedics to do their job well. He would have no choice about the matter. This lack of choice, or rather the irrelevancy of choice in the matter, separates trust from dependency. Dependence does not exhaust the meaning of trust. In some ways this is similar to G.E. Moore's open question test. We can always meaningfully ask of someone, "Yes, I know you are depending on X for Y, but do you really trust X to do (or provide) Y?"

We can see this even more clearly when we have a conscious, competent adult. Take a soldier in the field who may have to depend upon his commanding officer's knowing what to do in the upcoming engagement. Unfortunately, the officer has frequently demonstrated that he is lazy and unconcerned with the lives of his men. Or suppose when Ken is in his Aunt Sue's care he suddenly comes down with appendicitis. Sue takes him to the hospital for emergency surgery but learns to her horror that Dr. Johnson is the only person available to perform the surgery. Sue, who was close friends with Dr. Johnson's ex-wife, has good grounds to believe that he is an incompetent and a drunk. Sue is clearly depending upon Dr. Johnson to save Ken's life and Sue is thereby vulnerable (as is obviously Ken). The soldier is depending upon his commanding officer and clearly vulnerable to any mistakes. However, it is obvious that Sue doesn't trust Dr. Johnson and that the soldier doesn't trust his commanding officer. This distinction is important for situations in which a person depends upon another and yet trust is absent. Such situations are unfortunately fairly common.

There must be something about those people in a trusting relationship which separates them from those in a "mere" dependence relationship. Whatever it is that distinguishes those situations that are characterized by trust from those that are mere dependence is not locatable in the trusted party. We can have the same person being trusted by one person and not by the next. Suppose that Ken who is actually going under the knife of the drunken surgeon knows nothing at all about the surgeon's reputation as a drunk and a hack. Ken may have heard reports from Dr. Johnson's children about how wonderful a surgeon their father is. Ken

may therefore believe everything will be fine even though his Aunt believes the operation is likely to be a disaster. They are both depending upon Dr. Johnson, but only one trusts him.

One thing that distinguishes the two is their different beliefs about what will happen in the future as a result of entering into this relationship. There is a sense of *confidence or positive expectation* with the one and a sense of fear and dread by the other. Ken believes that as a result of this relationship with Dr. Johnson he will have a good outcome. This is not to say that all mere dependence relationships are marked by a sense of pessimism about the outcome; only that the sense of positive expectation characteristic of a trust relationship will not necessarily be present in a dependence relationship.

Furthermore, Ken, who trusts Dr. Johnson, is inclined to place himself in the care of the surgeon, as opposed to Sue, who is anything but inclined to do so. Sue is permitting Dr. Johnson to perform the operation only because she has no other viable options. So there is also a *disposition* on the part of the truster: a disposition to permit another party the power or authority to make decisions or take action if the circumstances arise. Ken may be unwise to be so disposed toward the surgeon, but that does not make it any less an instance of trust. If Sue said she trusted Dr. Johnson, but took the first opportunity to transfer Ken's care to any other surgeon she would be justly accused of insincerity. While it is certainly the case that this disposition is often acted upon it need not be case that the person ever actually has to put themselves into the power of the other for it to be a case of trusting. Maggie may trust Sue to raise Ken and Maria if anything should happen to herself and Joe, but trust need not be acted upon before one can say that it is present.

"competency"

In order for us to have this confident expectation we must believe that the other party is *competent* to perform the allotted tasks. It is impossible to have a positive expectation about an event if one believes that the person authorized with the task or decision in question is incapable of handling it. If Maggie's old grad school chum, Scott, is actually a terrible economist and writer and Maggie is aware of these facts, it is hard to see how she could legitimately be said to be trusting his opinion about her paper. She might still ask him for it with the intent of making him feel good, but it is difficult to see how she could have any positive expectations about

acting on the advice. In fact, even if by a stroke of luck Scott made some intelligent suggestions, Maggie would probably be hesitant to incorporate them precisely because of her lack of confidence in Scott's competency. Or imagine that Sam, the Griffith's neighbor, has owned four different dogs in the past three years that have all died because he forgot to feed them or take them to the vet when they were sick. Under such circumstances it would be odd, to say the least, to hear the Griffiths say they fully trusted Sam to care for their family dog over the next year.

This is not to say that wherever there is trust the trusted party always has the requisite competency. There are plenty of situations in which we trust someone and yet the other is not competent or skilled enough to complete the necessary tasks. Furthermore, it is a separate question as to how much information we need to have about others before we can be considered justified in trusting them. Ken trusts Dr. Johnson because he has heard nothing but good things about the doctor's skills. Presumably his confidence in the outcome would be altered by knowing the facts about the situation. It would be another matter entirely if Ken had access to the same information that Sue has about the doctor's drinking. Moreover, there is likely to be a direct connection between this belief in the competency of someone and the disposition to authorize that person with the power to make decisions or take actions about something one cares about.

Is it possible to have trust where there is no confident expectation in a positive outcome? Imagine that instead of having appendicitis Ken has extensive neurological damage which requires a radically new and highly risky operation. Sue takes him to Dr. Smith who is neither a drunk nor incompetent; everything Sue has heard about this doctor has been positive. Sue says that she trusts Dr. Smith, but she believes that Ken is going to die. Assuming she is sincere in both these statements, she might mean a couple of different things.

It may be the case that Sue believes Dr. Smith is competent, but the operation is so difficult that it is beyond Dr. Smith's, or anyone else's for that matter, capacities. If so, Sue's claim that she trusts Dr. Smith would translate as something along the lines of, "Well, I don't think there is any realistic hope of success, but whatever possibility there is lies with Dr. Smith. He knows as much as anyone and will do everything he can." Confidence here is not the same as a positive expectation about the outcome; it is a comparative term. In such circumstances to be confident in the doctor is shorthand for describing the extent of Sue's inclination or disposition toward alternative candidates who might be authorized with the same task or decision. Under such

an interpretation it would be appropriate to say that one can trust someone even though a positive expectation about the outcome is absent. This would mean that in articulating the notion of trust the requirement of belief in competency of the entrusted is more primary than having a positive expectation about the outcome of an event. However, it would still be necessary to retain the idea of being disposed to authorize another with the task or decision.

A second possibility is that it is an inappropriate use of the term to trust someone when one believes that no good outcome is possible as a result of the relationship. Under this interpretation, Sue is not trusting Dr. Smith if she believes that the outcome will be a failure. What Sue might be trying to convey by the statement is that she thinks Dr. Smith is a skilled surgeon or that Dr. Smith cares a great deal about his patients. However, to say that Sue trusts Dr. Smith with regard to this operation is an inappropriate use of the term. It would be similar to a scenario in which two brothers are standing alone on a ship during a storm and one of them falls into the ocean. Neither brother can swim very well, but the second leaps in to do his best to save his sibling. To say that the first brother trusts the other to save him would not make sense. Under this interpretation it would not be possible to say that one person trusts another unless there was belief both in the skill or competency of the trusted party and that this skill or competency was adequate to produce a positive result with regard to the specific decision or task in question. While I am personally inclined toward the second interpretation, it is a matter that I believe merits further analysis to settle conclusively.

"discretionary power" and "conscious/unconscious trust"

In the narrative, those who are being trusted have a certain amount of *discretion* in the manner in which they wield their power. Annette Baier contends that one of the marks that distinguishes contractual relations from trusting relations is that a contract places a greater emphasis on restricting (if not outright eliminating) the discretionary powers granted to the parties. While this is an important insight on Baier's part, it has to be put in perspective. As we saw earlier, trusting relationships must also indicate what is being trusted and how far this trusting will extend. This said, Baier is right that there are always some discretionary powers granted by the dependent party in a trusting relationships.

If Maggie trusts Joe to pick out a comfortable home for the next year then Maggie will not constrict

Joe's choices too tightly with conditions regarding location, size, and cost. She will assume that he will try to balance all these features in a manner that will work out for the best for the family. If she does not trust Joe to manage this challenge, then she will specify each condition in great detail so as not to leave him such latitude. She may even bypass Joe completely and make the arrangements herself with a real estate agent in Bangkok. Likewise, in trusting Maggie with the care and welfare of their children while he is gone, Joe has granted Maggie a wide latitude about what constitutes good care. Upon hearing that Maggie is going to leave for a conference in New York, Joe does not stipulate with whom the children can or cannot be left, but leaves such decisions to Maggie. If he did list a set of people with whom he wanted the children left and refused to allow Maggie to modify or adjust this list according to her judgment, it would be a clear indication that he did not trust her judgment.

Lastly, the trusting may be *conscious or unconscious* in that either party may not be aware that there is an act of trust taking place. Trust frequently operates in the background of any number of exchanges and it is only explicitly acknowledged when there is specific reason to do so. It is interesting to consider what we would think if we learned that Maggie told Joe before he left, "Remember I am trusting you to remain celibate until I join you." If she did make such a statement it would probably be because she feels she has some specific reason to doubt that he would remain celibate (perhaps in the past he had an affair) and she wishes to clarify what is at stake. Presumably it is unnecessary for Maggie when asking the stranger for directions to the airport to say, "Remember I am trusting you to tell me the truth." It is a background assumption of the request.

Is it the case that those we trust also may not be aware of the trust which is being extended to them, but may acknowledge it in hindsight? If Maria and Ken leave their aunt's house to visit friends without informing her, thereby causing the aunt enormous worry and anxiety, they may be doing so without recognizing the trust that had been extended to them, at least until after the fact. When their thoughtlessness has been pointed out to them they, if they are at all sensitive people, will not take refuge in saying, "You never explicitly said we should notify you, how were we to know?" Part of becoming socialized is learning how to recognize such background assumptions of trust and the corresponding responsibilities. This point will be more fully examined in Chapter Four.

Section II: Demarcating trust

A provisional account and the need for a "good will" condition.

Is this sufficient to say what trust is? Incorporating all the elements thus far discussed would result in the following definition of trust.

X trusts Y means:

- 1) X depends on Y (the *dependency* condition)
- 2) X is vulnerable to what Y does (the *vulnerability* condition)
- 3) X has an object of interest to X (the *trust object* condition)
- 4) Y has discretionary power over X's trust object(s) (the *discretion* condition)
- 5) X is disposed to allow Y this discretionary power (the *disposition* condition)
- 6) X believes Y is competent with respect to the trust object (the *competency* condition)
- 7) X confidently expects Y to succeed with respect to the trust object (the *confident expectation* condition)

So defined, trust may be conscious or unconscious.

Although this is a good start it still does not adequately capture what is meant by trust. There are many types of scenarios where someone meets all the above conditions and yet does not trust the other person. This is often the case when the two parties utilize a legal contract to govern the relationship. Obviously, contractual relationships may take place between two trusting parties and often do. However, a principal virtue of a contract is that it allows us to be dependent upon others and have some measure of confidence in the outcome without fully trusting them.

Suppose that immediately after Robert takes over the Griffiths' house, he and Sam find they dislike each other intensely. However, they share the access road out of the forest in which they live, and it requires a thorough plowing several times each winter. Robert despises manual labor and Sam doesn't mind, so they draw up a contract with a lawyer for Sam to make sure the access road is clear each day by 8:00. In return for Sam doing this, Robert will pay him 500 dollars a year. If either side fails to live up to his part of the contract he'll have to pay the other a fine. So Robert is disposed to allow Sam power over something of concern to

himself and is willing to allow Sam some discretion about the task (Sam can do it at 7:45 or 4:00 in the morning, with a snow plow or a hand shovel, subcontract the job out or do it himself). Robert has a positive expectation about the relationship and is vulnerable (if Robert desperately needs to leave and Sam has not plowed it he will be stuck). Finally, though he dislikes Sam, he thinks he is competent to do the job. All the conditions listed above are satisfied and yet it doesn't seem right to call this trusting.

There are other sorts of circumstances where the above conditions are present and yet it seems inappropriate to refer to it as a trusting relationship. Whenever we attempt to minimize our vulnerability by extensively monitoring the other's behavior, we signal that trust is absent. Suppose that Maggie and Joe are a bitterly estranged couple and that Ken and Maria are only two and three years old. Maggie has divorced Joe because she suspected, although she could never prove it, that he was starting to molest the children. In every other aspect Joe seems a model parent. The court has ordered that the children must spend every other weekend with their father, and if Maggie fails to comply the court will grant Joe full custody. In order to cope with this situation Maggie secretly installs a video camera in Joe's residence, thereby allowing her to monitor his every move. Furthermore, she spends a great deal of time teaching Maria and Ken how to avoid any "games" Joe might play with them. So Maggie is disposed to allow Joe to have discretionary power over the children: a disposition generated primarily from her fear of losing the children. Moreover, she does so with a positive expectation that Maria and Ken will be fine, because of her training and the camera equipment.⁵

To distinguish between the above sort of cases and those of genuine trust requires a further exploration of the reasons why people are disposed to depend upon each other with regard to a trust object. For Joe the confidence that he will be able to leave his garage each day is based on the contract and the legal system which stands behind it. Maggie's confidence stems from the monitoring equipment and her talks with her children. Notice that in both scenarios what is not motivating the vulnerable party to be so disposed is any belief in the *good will* of the other. Admittedly, "good will" like, "trust object," is an awkward term. It is meant to stand for any one of the following sorts of attitudes: "appreciate," "highly value," "having affection," "respect," or "being concerned for the welfare." Both the vulnerable parties have a confident expectation because of something other than a belief in the good will of the person they are depending upon.

In the case of Robert and Sam, Robert believes that Sam dislikes him, and it is because of these

feelings that Robert has little or no confidence that Sam will do anything to help him with regards to the road. Robert will only have a confident expectation about the road if there is some motivating force or pressure on Sam to help that is distinct from Sam's feelings toward Robert. In the case of Maggie and Joe, Maggie believes that Joe doesn't value the well being of the children enough to restrain himself. So for her, as well, any positive expectations she is going to have about the relationship must come from something other than a belief that the Joe has the requisite good will toward either herself or the children.

In order for trust to be present the vulnerable party must believe that there is good will on the part of the other directed toward either the vulnerable party or the trust object. These are obviously not exclusive conditions, for in many circumstances the trusted individual has good will toward both the truster and the trust object. In the narrative, Joe and Maggie respect and love each other and their children. When Joe trusts Maggie with complete control over the children he does so in the belief that she will care for them, not just because she loves him, but because she also loves the children. There is good will for both the vulnerable party and for the trust object. When Maggie asks Scott for his opinion of the paper she does so in the belief that Scott has affection and respect for her and furthermore, that he respects his own editorial judgment.

Still, trust is possible if there is good will toward only the vulnerable party or the trust object, though not both. It may be the case that Sue doesn't like her nephew and niece at all, but she is very fond of Maggie. As a consequence of her affection for Maggie she is willing to watch the kids while her sister goes to New York. It is because of her belief in Sue's good will that Maggie has a positive expectation about the outcome of the children's weekend at Sue's house. Suppose Sam hates the Griffiths' house, believing it to be an ugly eyesore and wishing it would burn down. He is good friends with the family though, and so he will take good care of the house until Robert takes over. On the other hand, trust also may be present as long as it is at least directed toward the trust object, even if it is not directed toward the vulnerable party. Sue may hate her sister but be crazy about the kids, and so she is trusted by Maggie. Sam may hate the Griffiths but love their house. Under such circumstances the Griffiths have positive expectations about the consequences of allowing him to tend it. Maggie and Scott may not like each other, but Maggie may know that Scott is honest and proud of his editorial skills. To lie and say the paper was good, when in fact he thinks it is mediocre, would be to show disrespect for the very thing which Maggie is trusting him about, his honest editorial judgment. While these are

legitimate cases of trust what they also illustrate is that the more good will is absent from the relationship the more reluctant we are to call it trust.

Therefore, one last criterion needs to be added to the list of conditions entailed in saying that X trusts Y:

8) X believes Y has some sense of good will toward either X or the trust object (the *good will* condition)

Further distinctions between "faith," "confidence," "dependence," and "trust"

Before continuing it may be helpful to distinguish trust from some related terms. To be confident is to have a strong expectation that future events will turn out the way we predict. Clearly trust involves confidence, but we can be confident about people's behavior and not trust them. As Laurence Thomas points out, one can be confident that a murderer being held in police handcuffs will not be able to hurt anyone but that does not translate into trusting him/her.⁶ To depend upon someone, as indicated above, means that the latter has some power or authority over something which is concern or importance to the dependent party. As the example of Sue taking Ken to Dr. Johnson demonstrates, though trust always involves dependence, we can be in a dependent relationship without having any trust.

Both confidence and dependence have been touched on previously, but what is the difference between faith and trust? In large part this will turn on what is meant by faith. Faith is often defined in such a way as to connect it inextricably with a belief in some religious or supernatural world view. To have faith means to have a belief in God's existence, goodness, power, love, etc. which, depending upon the tradition, may or may not be based on some empirical evidence. If this is the definition being considered, then it is easy to distinguish between trust and faith for trust need not involve faith, although faith may involve trust.

Many people use faith without any reference to religion. They use the term to signify confidence or belief about a statement or the outcome of a future event that goes beyond the evidence for it. For example, "to take something on faith" means that we have insufficient reason to believe that this is so, but we accept it anyway. Perhaps another way to put it is to say, faith is sometimes defined as the belief that something is possible in the absence of evidence or even in the face of some (but not conclusive) evidence to the contrary. In this sense, it is not irrational, but it is nonrational. Trust, as it has been thus far defined, is distinguished from

this in that trust involves reasons for the belief. In trust, the vulnerable party believes that there will be a positive outcome because of the competency and the good will of the trusted party. While this is not a full discussion of the idea of faith it should suffice to distinguish it from trust.

"mere reliance" versus "trust"

Someone may question whether it is necessary for good will to be involved. Wouldn't it be adequate to say that trust is a disposition by a person to be willing for another to have discretionary power over a trust object because of beliefs about the empowered party's competency and character? For example, suppose Gary, the regular family accountant, takes ill, and Joe isn't able to leave the family finances in his care. Instead, pressed for time, Joe hires Darrin. Joe doesn't believe that Darrin cares at all about either the Griffiths or his own profession. Darrin constantly and bitterly complains about how much he hates being an accountant and is clearly contemptuous of all his clients, including the Griffiths. Sailing is his great passion, and he only does accounting because he is skillful at it and makes a great deal of money from it. Furthermore, it is easy to tell from Darrin's frequent fearful comments about malpractice litigation that he is highly motivated by his fear of lawsuits not to make mistakes. So there is no good will toward either the trusting party (Joe Griffith) or the trust object (taking care of the Griffiths' accounts), and yet, Joe is disposed to leave the family accounts in Darrin's care with the confident expectation that there will be a positive outcome. This disposition is based upon beliefs Joe has about Darrin's character. Why isn't this a case of trust?

At first glance this may seem to be hair splitting, but there is actually a great deal at stake in separating out trust from what I call "mere" reliance relationships. Partly what is at stake is the level of security which separates the two kinds of relationships. Depending upon the nature and importance of the trust object, "mere" reliance relationships may be marked by a certain level of disquiet and unease. There is always the counterfactual operating in mere reliance relationships that, if the external constraints or motivations vanish then the vulnerable party will be in trouble. Since one cannot control these external constraints, there is less security. In the case of Darrin, the substitute accountant, his sole motivation for caring for the Griffith family finances is economic and the only restraints upon achieving that goal are external to the relationship: in this case, fear of the law. This means that the danger of abuse by Darrin feels greater than if there were, in addition

to these other factors, some degree of good will toward either the Griffith family or the profession of accounting. If Darrin could find a way of absconding with all the Griffith's money without any fear of being caught, he is likely to do so. If Joe is aware of this, he will be uneasy about their finances and generally apprehensive.

This unease may have serious repercussions by creating an underlying instability in the relationship. Joe will probably always be on the lookout for a new accountant. If Joe is able to secure the services of an accountant who does not display such contempt for his own profession or shows some regard for the Griffith family, then he will probably sever the relationship with Darrin and engage the other party. This uneasiness will most likely be apparent to the relied upon party who will, therefore, also be less inclined to remain with the relationship. The propensity to exit the relationship at the most convenient moment without great regard for the other, is a probable result of the unease characteristic of a mere reliance relationship.

There is also the discomfort that comes with being viewed purely instrumentally. It is not that people feel every relationship has to be with someone who cares about them; there are plenty of occasions in which we do not particularly care what another person's motivations are. However, most people find it unpleasant when they have to engage in a relationship with someone who views them as indistinguishable from any number of other people with whom they are entirely interchangeable. While friendship and love cannot even survive if this is the attitude shared by the participants, the distaste at being seen as mere ciphers in another's utility calculation is prevalent in less intimate relationships as well. Numerous surveys and studies reveal the concern people have about living in an impersonal society where they are viewed as simply a means for someone else to further their own goals. A similar point holds if the empowered party doesn't care at all about the trust object. Imagine what Joe and Maggie might feel if they left their children at a day care center and the staff make it clear that to them, one child is pretty much interchangeable with any other child. Regardless of the quality of the caregivers, the parents are bound to be hurt in being told that what is valuable to them is a matter of complete indifference to others. People want others to care about the things that mean the most to them.

Another aspect to be considered is the impact on the vulnerable party with regard to future relationships in those cases where they are disappointed or mistaken about the other. Finding out Darrin had absconded with all the money because he had discovered a loophole in the tax forms is bad enough, but it

would be much more devastating if Joe had thought that Darrin cared about the Griffiths on a personal level. Even if Joe thought that Darrin did not care for the Griffiths personally, but did think a great deal of his own profession, such disappointment would be disturbing because it poisons Joe's future relationships with accountants. If an accountant who respected his profession, who had some professional integrity would behave in such a manner, then it will be harder to trust any accountant again. On the other hand, if it were a mere reliance relationship (e.g., Darrin had always seemed to hold his profession in contempt) then it really doesn't say much about the general class of accountants if Darrin turns out to be malicious.

These observations help shed yet another insight about trust. In a trust relationship there is often a focus on the good or integrity of that relationship and not on something external to the relationship.⁷ Either there is good will toward the trusted or there is shared good will for the trust object. In either case, these are elements which can only exist because of this particular relationship and not just any other. Good will is both an important constitutive element of a trust relationship and instrumental towards the flourishing of it. Trust demands that the trusted party see the truster or the trust object as being of value, not merely useful. The fact of some positive bond between trusted and truster or between trusted and the trust object is essential to its being a case of trust as opposed to what might be called a "mere" reliance. In cases of mere reliance the other is viewed primarily as an instrumental means to achieve other goals. This holds in everything from friendships, to family, to professional relationships, to interactions with strangers.

For example, if Joe asks Sam to watch over the house while they're gone, Sam does so because Joe is his friend. It is the sort of thing friends do for each other. Joe can trust Sam because they value each other's friendship and friends don't betray each other unless they no longer wish to be friends. It is for the sake of the friendship that this is done. This should be so even in the case of trust among strangers. Laurence Thomas has argued that, if we trust strangers not to not lie or become violent it is not simply because we believe the only thing holding them back is their fear of the legal repercussions.⁸ If this were the case, we would live much differently than most of us do. It is because of the widespread belief that, for the most part, people don't want to kill other people or even hurt them, and that most people have a certain amount of respect for the truth, that there is trust. People view their relationships with other people as important things in and of themselves, even at relatively brief levels of contact, such as encounters with strangers at bus stops and on airplanes.

In what follows "rely" will refer to expectations held by X that Y will behave in a certain manner based upon beliefs that X holds about the character of Y. A "mere reliance" relationship is one where X believes that any good will on the part of Y is entirely absent. This distinguishes "reliance" from "trust" in that in trusting there is a more specific belief held about the character of the entrusted, namely that the trusted party has good will towards either the vulnerable party or the trust object. So all trust relationships are reliance relationships but not vice versa.

Concluding remarks to Chapter Two

To recapitulate,

X trusts Y means:

- 1) X depends on Y (the *dependency* condition)
- 2) X is vulnerable to what Y does (the *vulnerability* condition)
- 3) X has an object of interest to X (the *trust object* condition)
- 4) Y has discretionary power over X's trust object(s) (the *discretion* condition)
- 5) X is disposed to allow Y this discretionary power (the *disposition* condition)
- 6) X believes Y is competent with respect to the trust object (the *competency* condition)
- 7) X confidently expects Y to succeed with respect to the trust object (the *confident* expectation condition)
- 8) X believes Y has some sense of good will toward either X or the trust object (the *good will* condition)

As with any commonly used term, we want to capture the everyday use of the "trust" while simultaneously eliminating the ambiguities that contribute to philosophic confusions. The resulting construction must be partly descriptive and partly stipulative. This means differentiating between faith and trust, as well as explaining the ways in which trusting someone differs from simply being able to predict their behavior or relying or depending on them. However, some people will rightly point out that trust is closely related etymologically to 'faith', 'dependence', 'steadfastness', 'true', 'reliance', and 'confidence'. Inevitably, where one draws the lines to establish the distinctions will be arbitrary, in the sense that a plausible argument could be made for drawing the line elsewhere.

As consequence of this, the very project of constructing a definition which distinguishes among the various terms may be challenged by those thinkers who wish to preserve the close connection. For example, some philosophers feel that trust is a sub-category of faith. Many dictionaries of religion or philosophy have entries on faith that emphasize the connection with trust, but there is no entry specifically dedicated to trust.⁹ Others claim that trust, faith, confidence, and dependence are all much the same thing. For instance, both Keith Hart, and Alvin Plantinga maintain that these are all belief states about the outcome of a future event. For them the primary difference among these ideas is in terms of the strength of conviction of the believer and the level of risk involved.¹⁰ In fact, people in everyday conversations often use the terms interchangeably and see no need to make any distinction among them.

The narrative about the Griffiths provides a means for responding to these challenges. It was written with the assumption that no single trusting relationship can be thought of as most representative of the concept. Thus, the narrative contains numerous kinds of trusting relationships: no single relationship is predominant. Considering such a diverse assortment of relationships allows us to delineate a set of necessary conditions.¹¹ Whether the account I offer here is an adequate response to those who believe that there is no need for distinctions among trust, dependence, reliance, and faith can only be decided after the project is complete. It has been my intent here to show that there are frequently subtle but vital differences between saying, "I trust him/her with this task" and saying, "I am depending on him/her to do this task," or "I am relying on him/her to do this task." These differences arise because reliance, dependence, and trust may have strikingly different accompanying emotional and cognitive states. Not appreciating these differences leads to misunderstandings, confusion about ethical responsibility, frustration with other people's behavior, feelings of violation, a loss of a sense of security, and other negative results.

To further clarify the concept of trust I now turn to the question of whether it can be used in a meaningful fashion when directed toward collectives.

ENDNOTES

1. While the literature on trust is not as extensive as the importance of the topic warrants, there have been several writers who have attempted to define trust. My account in this chapter has been influenced and shaped by these writers, and I gratefully acknowledge their work. I believe the most important are the following: Annette Baier, **Moral Prejudices: Essays on Ethics**, (London, England: Harvard University Press, 1994) especially chapters 6-9; Bernard Barber, **The Logic and Limits of Trust**, (New Brunswick, N.J.: Rutgers University Press, 1983); Laurence Thomas, **Living Morally: A Psychology of Moral Character**, (Philadelphia, Penn.: Temple University Press, 1989) especially chapter 7; Peter Johnson, **Frames of Deceit: A study of the loss and recovery of public and private trust** (New York: Cambridge University Press, 1993); ; Virginia Held, **Rights and Goods** (New York: Free Press, 1984) especially chap 5; Jay Katz, **The Silent World of Doctor Patient** (New York: Free Press, 1984) especially Chapter 4; Sissela Bok, **Lying: Moral Choice in Public and Private Life**, (New York: Vintage Books, 1979); Trudy Govier, "An Epistemology of Trust," **International Journal of Moral and Social Studies**, 8 (Summer 1993): 155-174; and "Self-Trust, Autonomy and Self-Esteem," **Hypatia**, 8 (Winter 1993): pp.99-117; and "Trust, Distrust, and Feminist Theory," **Hypatia**, 7 (Winter 1992): p.16-33; Olli Lagerspetz, "Legitimacy and Trust," **Philosophical Investigations**, 15 (January 1992): pp. 1-21; and the following two collections of essays: **Ethics, Trust and the Professions: Philosophical and Cultural Aspects**, ed. Edmund Pellegrino, Robert Veatch and John P. Langan, (Washington D.C., Georgetown University Press, 1991); and **Trust: Making and Breaking Cooperative Relations**, ed. Diego Gambetta (New York: Basil Blackwell, 1988).

I have decided against presenting each author's version or even the five that I believe are the best. Instead, I have chosen to offer my account of the eight key features of trust and why these constitute its essential attributes. Most of these authors would probably accept my final version, and even those who disagree with key components agree on other parts. Sorting all of this out would not be, I believe, particularly helpful. As I say, I freely admit that much of the groundwork for my account comes from these sources, although the presentation and final articulation is my own.

2. Not every dependency relationship that ends badly can be properly called the fault of the one being depended upon. Sometimes events are simply beyond our control, or we are thrust into situations where others are depending on us and do not have the requisite capacities or skills to accomplish the goal. Suppose that, while Ken is still an infant, Maggie and Joe take off for a weekend vacation and leave seven year old Maria in charge of his care. She is excited about having the house to herself for the two days and likes the idea of being solely responsible for her baby brother. That night Ken goes into a respiratory failure that could be easily handled by paramedics if Maria would only call 911. However, Maria panics, forgets what to do, and Ken dies. It might be plausible to argue that Maria is at least partially causally responsible for Ken's death, but not that she is culpable. The determination of culpability, the ascription of moral blame to someone, depends upon a host of other factors beyond simply determining who was there that could have done something. This question will be returned to in Chapter Four.

3. Without the proper knowledge of the context, statements such as "Maggie trusts Joe" can easily become obscure or muddled. Typically the trusting party does have a specific trust object(s) in mind, but if the context is not understood then the trust object has not been properly specified for the trusted party. Unfortunately, without such specificity there is an enormous potential for miscommunication and damage. Maggie may be trusting Joe to be sexually faithful for their separation but not state this explicitly. It may be that Joe thinks Maggie doesn't care that much about whether he has a one night stand, but that her trust is specifically directed toward his finding the family a safe comfortable place to live. Or it could mean that Joe believes his veracity is the trust object. Under such an interpretation an affair would be acceptable as long as he is truthful about it.

These differing interpretations arise, in part, from a recognition on the part of both Joe and Maggie that trust does have an object. Both parties are aware that trust cannot be about everything, and for any instance of trust there is a specific range of things being trusted with or about. The difficulty is that there are not in synch about what that object is.

4. However, some people may use "depending" as synonymous with trusting or relying and explicitly mean a psychological or intentional state. If by depending they mean an intentional empowering of someone else with confident expectations that the person will successfully handle the task, then that is acceptable.

Sometimes, where technical expertise is required or time is short our choices are so restricted that we can scarcely avoid depending on another. In other situations the depending party may be doing so for the sake of convenience or to avoid having to be personally involved in a repugnant task or because of laziness or to learn more about the other person's talents and capacities.

5. Admittedly, Maggie's disposition to allow Joe access to the children has its coercive element. Maggie would also have to believe that Joe is capable of controlling himself around the children, that he is "competent" in a psychological sense to be able to restrain his behavior. If this is not the case it is doubtful that she would have any positive expectations, no matter what she had done to protect the children.

6. Laurence Thomas, **Living Morally**.

7. It is in many ways similar to the important distinction Alasdair MacIntyre makes in **After Virtue** (Notre Dame: University of Notre Dame Press, 1981) about rewards that are internal to a practice and those that are external to it. There are practices, such as baseball, which we engage in for the pleasures which arise from the activity: the mental stimulation, the excitement of competition, the aesthetic enjoyment of being part of a well executed double play. Of course, one can also engage in this same activity because it is an effective means to goals external to the practice of baseball: fame, money, success in sex. Aristotle makes a similar point in Bk. VIII: Ch. 13 of the *Nichomeachean Ethics* where he argues that friendships based on utility are of an inferior sort.

8. Laurence Thomas, **Living Morally**.

9. Cf. **The Encyclopedia of Philosophy**, ed. Paul Edwards (New York: Macmillan Publishing Company, 1967); and **The Dictionary of Philosophy and Religion**, William Reese (New Jersey: Humanities Press, 1980); and **Dictionary of Christian Lore and Legend** J.C.J. Meteford (Thames and Hudson, 1983). For example, John Hicks writes in this article on faith in the **Encyclopedia of Philosophy** that faith can be thought of as a, "trusting and confident attitude toward God" and may be compared to trusting fellow human beings. However, he does not then explain the similarities and differences between an attitude directed toward a fellow human being and one directed toward God.

10. Keith Hart, "Kinship, Contract, and Trust", **Trust: Making and Breaking Cooperative Relations**: 193-197; Alvin Plantinga, **Faith and Philosophy** (Grand Rapids, Michigan: W.B. Eerdmans, 1964).

11. Admittedly, for some this may not even be considered a definition in the proper sense of the word, if by definition one means supplying necessary and sufficient conditions for a term.

CHAPTER THREE

CAN WE TRUST A COLLECTIVE?

Introduction

In this chapter I continue the analysis of trust initiated in Chapter Two by considering whether it is plausible to speak of "trusting a collective." I begin by outlining some reasons for the importance of answering this question. I then present a series of objections by Methodological Individualists who assert that trusting a collective, as such, is conceptually impossible. These objections generally take one of two lines of argument. Either it is impossible because collectives are nothing but aggregates of individuals or because collectives cannot be meaningfully said to act. Utilizing work by David Wiggins and Peter French, I argue that these objections are inadequate to simply rule out the possibility of trusting a collective. Then, building on French's work, I delineate those features a collective must possess in order for the concept of trust to be applicable. I conclude by discussing some differences between organizations and professions. In particular, I point out that in some ways it is harder to apply the concept of trust to professions than to organizations, even though the former are often taken to be paradigmatic examples of trusting relationships.

All that is meant for the moment by the term 'collective' is more than one person being considered as a group and not solely as separate individuals. Examples are: a collection of five people waiting at a bus stop, IBM, a baseball team, Catholics, the ACLU, Michigan State University, the AMA, African Americans, AFL-CIO, the Ku Klux Klan, the Interstate Commerce Commission, the movie industry, a family. Given the wide variety, I will quickly restrict the discussion to only two kinds of collectives: organizations and professions.

Finally, as in the previous chapter I wish to stress that the point is not whether it is sensible to trust collectives: whether one is foolish or gullible to do so. Such considerations are matters of justification or reasonableness and will be dealt with in subsequent chapters. Rather, my question is whether the definition worked out in the previous chapter, the "thin" notion of trust, as it were, can be applied in a coherent fashion to collections of people. Does it make sense to say that Joe trusts the U.S. State Department when he accepts the ambassador's assessment of the political situation in Thailand? Does it make sense to say that Sue trusts the ratings board when she selects movies for her ten year old nephew using the ratings code of G, PG, PG 13, R

and NC-17? Is there the right sort of overlap between collectives and individuals such that the same notion of trust is applicable to both, or is "trust" as applied to collectives really a different sort of phenomenon deserving of a different name altogether?

Section I: The importance of collectives and how we interact with them

Why the question matters

There are a number of reasons for examining the question of whether we can trust a collective. First, there is the matter of conceptual clarity. The examples utilized in Chapter Two were cases of interpersonal trust; trust between two human beings. It is relatively uncontroversial to say that one person can trust another person. Is it equally appropriate to claim a person can trust a collection of people? It is certainly the case that people say, "I trust Toyota more than GM," or "I trust the Democrats to do the right thing about health care," or "I trust the judicial system to give a defendant a fair trial," or "I trust this drug won't hurt me because it is FDA approved," but do such statements make good sense? Conceptual clarity is important, not merely because of an intellectual curiosity about the nature of trust, but because of the extraordinary importance of collectives in a modern society. In a complex society such as ours, our lives are inevitably intertwined with a wide assortment of collectives. Simply consider the numerous ways we interact with organizations. Almost all of the work performed by U.S. citizens is done in organizations, and almost all goods and services are delivered by organizations. The kinds of organizations a person belongs to reveals a great deal about that person's social standing. Some kinds (e.g., GM, IBM) have tremendous economic impact upon the communities where they are located. Finally, some organizations (e.g., Democratic party, NAACP) historically have been instrumental in bringing about enormous societal change. As Richard Hall says, "Organizations have outcomes...for individuals, for categories of individuals, for communities, and for society."¹

A second reason lies with the changing nature of another kind of collective, the professions. Medicine, law, accounting, architecture, and teaching have all undergone radical metamorphosis in the last half of the century. In health care, the old days of an ongoing relationship with a family doctor are gone. When people become sick nowadays they are increasingly likely to entrust their care to a hospital emergency room or an HMO. With regard to financial matters an increasingly larger number of people no longer do their finances

alone. Every April millions of taxpayers turn highly personal financial information about themselves over to tax consultants whom they never see again since they will probably get another member of the firm the next year. The only people likely to receive personalized care on an ongoing basis are the very rich who can afford such relationships. Increasingly, the rest of us must make do with impersonal institutions, corporations, organizations. Independent practitioners are increasingly being replaced by collectives such as HMOs, mega-universities, franchise or "chain" law and accounting firms.

Yet the four traditional professions (i.e., teaching, ministry, law, medicine) have often been taken as providing paradigmatic trust relationships. The trust between a lawyer and client, between a doctor and patient, and between a priest and parishioner are supposed to be fundamental to the very nature of the interactions between them. Therefore, there is a serious question about whether this alteration in the nature of the professions makes trusting an obsolete ideal and perhaps even destructive to the individuals who are engaging the services of the professionals. The enormous influence of (at least some) organizations and professions implies that they have potential for great good or great evil. Understanding how best we can cope with the changes taking place within these powerful collectives depends upon resolving the conceptual questions about trusting collectives. We can see this by examining two different concrete questions within medical ethics: should the AMA be assigned the task of reforming health care and why do African Americans not donate organs at the same rate as caucasians?

The American Medical Association is one of the most powerful organizations in the country. It presently represents about 40-50 percent of U.S. physicians but at various points in its history as many as 70 percent of all U.S. physicians have been members. It has access to enormous financial resources and maintains a very active lobbying presence in Washington D.C. It frequently issues policy statements to the effect that whatever ills presently plague the medical industry, it and its members should be the dominant players in fixing them. All through the ill-fated 1992 health care reform debate the AMA constantly chastised the administration for not adequately consulting with it on the specifics of the bill. Throughout this period the question of the role of the AMA was extremely important. After the failure of that legislation it became even more so, as the AMA continued with its assertions that it, and its affiliated organizations, should shape the structure of health care reform.

This is actually quite similar to the last time large scale health care reform was initiated. Richard Harris, in his 1966 book, *A Sacred Trust*, documents the history of the AMA in this century with regard to health care reform. He convincingly demonstrates how the AMA has frequently voiced a deep public concern for reforms, while at the same time working strenuously to maintain the status quo.² It spent millions of dollars opposing Medicare and Medicaid, wooing congressmen with campaign contributions, sending members brochures to leave in waiting rooms, and encouraging its members to persuade their patients to support AMA policy. Even after Medicare and Medicaid had passed with large support, the AMA seriously considered boycotting the entire system.

A different although equally important question arises from the fact that while African-Americans make up 30% of all end stage renal disease patients (ESRD) they represent only 11 percent of all kidney donors. Due to a number of factors relating to blood grouping and major histocompatibility complex (MHC) it is harder to achieve an optimal match between caucasian donors and African American patients.³ This puts the African-American community at a decided disadvantage when a transplant is needed. The reasons for this are numerous, but a mistrust of physicians is frequently cited as a reason for refusing to sign organ donor cards. In one study, a number of respondents said that they couldn't trust the doctor's competency in the procedure or that if they were known to be a donor the doctors would not do everything possible before taking their organs.⁴

Does it make sense to talk of trusting or distrusting the AMA? Does it make sense to talk of mistrusting a profession, like doctors? Obviously people are using the notion of trust or distrust in these contexts but is this only adding to the confusion? Is the question of trust even meaningful in these settings? What features of a collective should we examine if we are to answer such questions? If trust is meaningful in these contexts, we can then move on to questions of whether the mistrust is justified, which collectives have the greatest impact on trust in interpersonal relationships, whether we should work to increase trust in the collectives themselves, what techniques could be used to accomplish these goals, and so on.

One last word of caution may be warranted here. Virginia Held persuasively argues that much of the debate over collectives has been clouded by an over-reliance on analogy.⁵ Held is primarily concerned with the question of corporate responsibility, but her warning applies equally to most discussions about collectives in general. Some writers compare collectives to biological organisms, others compare them to human beings,

and still others compare them to machines. Such analogies may be necessary in the initial stages of an inquiry, but eventually they become more of a hindrance than a help as the investigation progresses. Nothing that follows is intended to advance the claim that collectives are just like human beings or that trust of a collective is identical in all ways to interpersonal trust. All that is being considered here is whether or not individuals and collectives share enough of the same salient characteristics for the term trust to be equally applicable to both.

Two ways we relate to collectives

Individuals and collectives interact in a variety of ways, but for the purposes of the following discussion I will confine myself to only considering two of them. First, we may regard another person as a representative of some particular organization. In such cases, the substance of our opinion and assumptions about him/her is largely determined by our beliefs about the nature of the collective. Sociologist James Coleman refers to such representatives as corporate actors.⁶ Consider the following contrasting examples. Joe is speeding home from a late night meeting and sees the red lights of a state police car in his rear view mirror, signaling him to stop. He pulls over to the side of the road in rural Michigan at 1:00 in the morning and allows an armed man who is a complete stranger to him to order him out of the car. He may be nervous about the ticket he is about to receive or about the dangers of discussing his driving while parked on the side of a road with cars going by, but he does not plot strategies of how he might overpower the officer. However, suppose that while walking along the same rural road at 1:00 in the morning, Joe hears someone behind him call to him to slow down or stop. He turns around and sees a man with a pistol on his hip who doesn't represent any organization whatever. At this point Joe may very well begin to consider how to escape or how to overpower the man. The differences in disposition lie in the fact that the former is a representative of an organization which Joe recognizes.

Alternatively, there are relationships not between an individual and a specific representative but rather between an individual and the organization as a whole. People say, "I think that the Democratic party will do the right thing when it comes to health care reform." Here the judgment is not directed toward a particular person's actions but rather of the actions of a collective as a whole. There is no one particular Democrat who is the focal point; the subject is the group of people who identify themselves as

Democrats.

A strict communitarian might object to the distinction between interpersonal and collective relationships being employed here. Such a distinction they would claim rests on the fallacy that there is some entity, "the individual", that is somehow distinct from the being who is a participant and representative in numerous collectives. For a philosopher such as Michael Sandel, individuals are primarily the sum total of their membership in various collectives or communities. People are knowable and known via their ascribed or acquired positions in their professional, personal, religious, aesthetic, and political lives. They are doctors, masons, waiters, cabbies, musicians, academics, students, prostitutes. They are parents, lovers, friends, single, married. They are Jewish, Catholic, Agnostic, Methodist, Episcopalian. They are Democrats, Republicans, Libertarians, Radical Marxists. It is only through their participation in all these collectives that any individual acquires an identity, and it is only through seeing people in these roles that people come to understand each other.

While this is an important and extremely interesting topic, it is probably not necessary to go into it here. Surely there is a distinction between knowing someone as the sum total of their membership in a set of communities and knowing someone primarily as a member of some single community. In the former case we are talking about seeing someone as the messy conglomeration of various roles which all come together in a unique package known as that particular individual. In the later case we are considering a person primarily as a representative or member of some collective, either being unaware of or disregarding their membership in the other collectives.

All this is not to say, of course, that trusting someone as a representative of a collective is precludes trusting them on an interpersonal basis. People occupy many roles in their lives, and we cannot always be certain which is operative in a given encounter. A friend may also be our teacher and how this affects both relationships is complicated.

"good will" and collectives

In order to see if trust with respect to a collective is basically the same as to an individual, it will be necessary to see if it meets the conditions laid out in the previous chapter. To recapitulate,

X trusts Y means:

- 1) X depends on Y (the *dependency* condition)
- 2) X is vulnerable to what Y does (the *vulnerability* condition)
- 3) X has an object of interest to X (the *trust object* condition)
- 4) Y has discretionary power over X's trust object(s) (the *discretion* condition)
- 5) X is disposed to allow Y this discretionary power (the *disposition* condition)
- 6) X believes Y is competent with respect to the trust object (the *competency* condition)
- 7) X confidently expects Y to succeed with respect to the trust object (the *confident expectation* condition)
- 8) X believes Y has some sense of good will toward either X or the trust object (the *good will* condition)

With regard to conditions 1) through 5), it seems that we certainly do have a disposition to depend upon collectives through our willingness to allow these collectives to have discretionary power over things we care about and that this makes us vulnerable. Furthermore, we often times act on this disposition. We place our safety in the hands of a police officer who pulls us over when we've been speeding rather than trying to get away. We place our safety in the hands of drug manufacturers on the basis of FDA assessment rather than test each drug ourself. People go to hospitals when they are sick rather than trying to heal themselves. Defendants place their freedom and possessions in the power of the legal system rather than trying to take extralegal steps (e.g. fleeing the country) to preserve them.

The same holds with regards to the sixth and seventh conditions: people frequently believe that collectives are competent to carry out tasks they have been assigned and that as a result of this a positive outcome will occur. We believe that the police officer has been sufficiently trained by the police force in weapons and automobile safety. Because of this belief when we hear a siren most of us do not fear that this will immediately be followed by the officer opening fire at the wheels of the car. In buying aspirin we believe that the FDA can easily determine whether the aspirin we are buying has serious side effects not commonly

associated with commercial pain relievers.

It is also the case that we may either consciously or unconsciously decide whether to depend upon collectives. When we pick up some aspirin we probably do not consider whether the FDA should be trusted to protect us from unscrupulous manufacturers who would substitute cheap inert ingredients for the proper items. On the other hand, after scandals in the 1980's surrounding dishonest Sears auto mechanics, consumers may consciously wonder whether a Sears auto mechanic is trustworthy.

The difficult question lies with whether or not it makes sense to talk of collectives having "good will" toward a person. Without this feature a person may have confident expectations, but this confidence would be more like that directed toward inanimate objects. We might be confident that a bridge will remain standing, be disposed to go over it as opposed to taking the ferry, and believe that a positive outcome will result from doing so. None of this presupposes any belief in the good will of the bridge; indeed, it is absurd to speak of the bridge having any good will toward its travelers. Is this the case with collectives?

Good will is a general term meant to stand for any one or combination of the following: "Respect", "having affection", "highly value", "appreciate", "concern for the welfare". Each of these is a kind of attitude, where attitude is defined in any of the following three ways:

- 1) behavior representative of feeling or conviction
- 2) an organismic state of readiness to act that is often accompanied by considerable affect and that may be activated by an appropriate stimulus into significant or meaningful behavior
- 3) a persistent disposition to act either positively or negatively toward a person, group, object, situation or value.⁷

In each of these definitions there is an explicit reference to action and an implicit reference to an entity that is capable of having beliefs, feelings, or convictions. Therefore, in order to speak of a collective having good will it first has to be the case that it is both capable of having beliefs, feelings or convictions and that it is capable of acting on those beliefs, feelings, or convictions.

Section II: Methodological Individualist objections

MI objection 1: collectives are only aggregates of individuals

One way to avoid the question of trusting collectives entirely would be to reduce all cases of trusting collectives to interpersonal trust, a version of the position known as methodological individualism. The Methodological Individualist (hereafter referred to as MI) maintains that any statements about collectives can be reduced to statements about specific individuals and the relevant circumstances in question. According to this view any action said to be taken "by a collective" is redescribable in terms of the individual actions of the constituent members of the collective. To explain the statement, "The ACLU announced that it was against the nomination of Robert Bork for the Supreme Court" we refer to those members of the ACLU who were involved with the decision to issue the announcement, as well as those members of the organization who supported that decision. It may be more convenient to use the shorthand label ACLU instead of the longer and more awkward statement, "The following people, who are all paid members of this organization as of this date, Mr. A, Ms. B, Mr. C, and so on". However, it would only be a matter of convenience and we should not make the mistake of reifying the organization by thinking of it as something different than that list. If the MI is correct then asking whether one can trust a collective, **as such**, is impossible to answer because the question makes no sense.

One argument frequently advanced by the MI concerns the ontological status of collectives. The claim is that since no collective can exist without the individuals who are members of the collective, all that really can be said to exist is that set of individuals. Without the executives, factory workers, salespeople, stockholders, engineers and so on, a corporation like GM would not exist. There is no entity over and above these individuals which can be pointed to, inspected, examined, interviewed, listened to, etc.; there are only C.E.O.s, management representatives, "average" employees. Many philosophers who disagree with much of methodological individualism accept this part of the position. For example Patricia Werhane writes,

A corporation is not an independent entity. Corporations are constituted by, and exist and function only because of, their constituents...No one ever "sees" a corporation, per se. A corporation does not appear in court, it does not shake hands or speak on television.⁸

There is no being known as the ACLU which can be asked questions by T.V. reporters about its decision to oppose a nominee for the position of attorney general. There are only three lawyers who were elected to the governing board by the membership and whose responsibilities include making public announcements.

It is not always exactly clear what is meant by this critique. If the point is that it only makes sense to speak of an entity as existing if one can point to it, touch it, or see it, this is hardly an uncontroversial claim. Any number of entities that are crucial to science (e.g., electrons, protons, neutrons, quarks) are not directly observable. Whether they are "real" or not is part of a highly contentious debate within philosophy of science, and there are reasonable arguments on both sides. However, the question of whether or not sub-atomic particles are real or not is certainly not settled by the simple statement that you cannot see them, touch them, or feel them.

Certainly it may be the case that reference to some collectives can be understood almost entirely as short hand way of referring to a list of people, e.g. the group of people who have red hair and are under five feet high. However, it does not follow that a list of the component material parts of an entity is strictly identical with that entity. In a 1969 article entitled, "On Being in the Same Place at the Same Time" David Wiggins shows why this cannot always be the case. Wiggins asks us to consider a leafless tree. The tree materially consists of the aggregate of the tree's cellulose molecules, but this does not mean that the tree is identical to this aggregate. If this were so then anything we were to say of the tree would be equally true of this aggregate, including conditions of persistence and survival through change. However, were we to use a special laser that allowed us to chop the tree down into logs with the loss of no cellulose molecules we would still have the aggregate but we would no longer have the tree. Conversely, if the tree were pruned and the trimmings burned then the particular aggregate would no longer exist but the tree would have survived.⁹

To say that the term 'ACLU' or 'GM' or 'Kaiser' or 'Michigan State University' merely stands for a particular list of people would miss an essential attribute of such groups, namely that they are structured so as to be able to retain a stable identity though individual members come and go. To be consistent in such a position one would have to say that every time a large collective changed some constituent member of its organization it became a new entity. Presumably among all the students, secretaries, janitorial personnel, professors, teaching assistants, provosts, administrators and so on, there is a turnover on an almost daily basis.

If this is so, then any major organization like a large state university would constantly be changing its identity. If this were so, every time a tree sprouted or shed its leaves or every time we trimmed the tree we would have to say that it is a new tree. This is not to say that the university is some separate substantive entity over and above all this personnel. It is simply to say that it is not strictly identical to a list of the personnel.

On the other hand, if the point is that without all of these constituent individuals the collective could not exist, this would seem true but not very helpful. The tree could not exist without cellulose molecules, but this does not therefore make it identical to any particular set of molecules. For any complex entity there are going to be any number of individual parts or components which, if they did not exist the entity would not exist. Without the component parts of the body; the bones, blood, skin, a neural network, and various limbs, a human being would not exist.

Even though many collectives are not reducible to a particular collection of individuals, it is still necessary to ask if collectives can be said to hold beliefs. Some might object that beliefs, convictions, and ideas are all mental events, and as such, can only be said to belong to an entity capable of having a mental life. Since there is no mind in a collective there is no place for these mental events to take place. Therefore, collectives cannot be said to have beliefs, convictions, or ideas and therefore cannot be said to manifest attitudes.

The controversy about whether only creatures with a mental life can be said to hold beliefs is part of a whole series of debates within philosophy of mind: What is the nature of belief? How do we accurately describe or discuss mental states? How is mind related to the brain? Is the notion of mental states useless? Is the notion of belief a useful concept? Certainly, if beliefs are defined as being strictly identical to some neurological activity in a human brain, then collectives cannot be said to have beliefs. There is no corresponding brain or neural network in an organization or a profession. However, if a belief or a conviction is defined as a proposition or statement asserted or held by an entity, then it is possible to say that collectives can have beliefs. How to determine what beliefs and convictions are held by a collective is a complicated question and will be examined in section three.

MI objection 2: collectives cannot act

The MI may respond that it is disanalogous to make the comparison between the human body and the collective for the simple reason that the individual parts of the human body are not autonomous individuals capable of acting apart from the interests of the body as a whole. As Manuel Velasquez states,

...this similarity is deceptive, because a group, unlike a body, is made up of autonomous individuals. The individuals who make up the organization are autonomous in the sense that each individual can choose not to carry out the direct bodily movements necessary to carry out the corporate act. And this autonomy is due to the fact that the body of each member is under the direct control not of the corporation but of the individual member.¹⁰

Of course this is the crucial question since the point of debate is in what sense the individuals in a collective can be said to be acting autonomously. Are they so autonomous that each action which is said to be taken by the collective is better redescribed in terms of an individual's autonomous wishes? If this is so then it would not make sense to talk about a collective acting, and it would make no sense to say one can trust a collective, as such. However, if it is the case that some actions taken in the collective's name cannot be explained solely in terms of autonomous actions of some individual, then it can be said that the collective can act.

If by "autonomous" Velasquez means that each individual is not physically controlled by something external or separate to his or herself, then he is correct. Or if Velasquez means that it is possible for a human being to engage in an activity or action without needing some authority from the collective, then he is correct. People disobey instructions from their company's management, defy the dictates of their profession, quit and strike off on their own. They are always capable of acting against the orders or dictates of the collective. By contrast, a person's foot moves because of neural signals which originate in the brain; our feet are incapable of acting alone. So he is right that a strict comparison between the body and the collective is inappropriate.

However, Velasquez's characterization of the argument as a primarily based on an analogy to the human body is a red herring. We should remember Held's caution about argument by analogy. It is a special sort of action which is under consideration. The sorts of actions under consideration are those which have the force of the collective behind them: whether Ford will purchase auto parts from one company and not another, whether a research hospital will direct research money toward breast cancer research and away from a new neo-natal unit, whether a university will increase the number of minority candidates being admitted into

graduate school. If autonomous means that we, as individual members of such collectives, formulate whatever goals we fancy, select whatever means we want to secure those goals, and then take whatever actions we think efficacious, then Velasquez is wrong. Within a collective the latitude of an individual to take action in the name of the collective is strictly limited.¹¹

Peter French has written extensively about collectives in his work on corporate responsibility. He makes a useful distinction between aggregate collectives and what he refers to as "conglomerates."¹² He defines an aggregate collective as one whose identity is exhausted by simply listing all the members, where there is no internal organizing principle and where there is no ongoing mechanism for retaining the identity of the collective if there is a change in its component parts. For example, take a random collection of six people sitting at separate tables at a local bar on a Friday afternoon and designate them, aggregate collection Delta. There may be any number of common features which each member of the group shares (perhaps none of them are bald and each is over 5'6" tall) but notice that this would be accidental to what makes them a member of aggregate collection Delta. What makes each of these people a member of this group is their designation as a member of the collection by an external source. The group members do not see themselves as connected in any significant way. No part of any member's personal perspective on what constitutes their identity is taken from being a part of this group. If each member orders a packet of peanuts and a pitcher of beer then it can be said that "the group" ordered beer and peanuts. This would be a legitimate example where an action by a group can be said to be completely redescrivable in terms of actions by individual members.

A conglomerate, on the other hand, has several features which make it possible to ascribe predicates to the conglomerate which are not solely reducible to its individual members. As French writes,

(1) conglomerates have internal...decision procedures by which concerted actions can be, though not necessarily are, chosen; (2) generally, the enforced standards of conduct for individuals associated in a conglomerate are different and more stringent than those usually thought to apply in the larger community of individuals; (3) members of a conglomerate fill differing defined roles or stations by virtue of which they exercise certain powers over other members, and it is important that a change in the identity of the persons filling those roles does not necessarily entail a change in the conglomerate's identity.¹³

Clearly the most important difference is that conglomerates, as opposed to aggregates, are highly organized. There is a discernable structure created by a conglomerate's rules, procedures, policy guidelines,

charter statements, methods of operation, and the like which are essential elements of the conglomerate itself. Without these it would cease to be that collective. It is this set of organizing elements (what French refers to as the Corporate Internal Decision System) that provides the means for distinguishing between an action taken by the collective and one which is merely the action of some individual member of the collective.

For example, even in collectives where very strong personalities are in positions of great power, e.g. Lee Iaccoca at Chrysler, the ability of the individual to act autonomously is limited by the goals of the collective. Iaccoca's choices about what to do at Chrysler are determined by the fact that the company must either show some significant profit which it can pass onto its shareholders or be engaged in a series of actions which are intended to make this possible at a future date. If Iaccoca suddenly takes it into his head that all capitalist enterprises are evil and should be eliminated, there are mechanisms in place to prevent him from acting on these thoughts.

The organizing principles also establish how decisions will be made, how options for collective action will be developed, how timetables for those decisions are to be constructed, and so on. Iaccoca cannot simply autonomously decide that it would be better for Chrysler to purchase all its parts from German manufactures and sign an order to make it so. There are procedures which have to be followed, committees to be consulted, and votes to be taken before any individual may act.

Another distinguishing feature of conglomerates is that the individuals within them occupy specific roles. These roles carry with them duties and responsibilities that will remain relatively the same no matter who occupies the position. College provosts have certain duties and responsibilities that any person who fills that position must perform. They must be a liaison between higher administrators and the faculty, hire temporary faculty, make sure that the students are receiving fair hearings. If we are to take the post, these are the kinds of tasks we must be able to accomplish. There are ongoing tasks, projects, and commitments which are passed on from the retiring provost to us and which we cannot ignore. There will be differences in the manner in which we go about these activities and some of us may take on more than the job description requires. However, this doesn't change the fact that there are still specific functions which the role of provost is designed to fulfill and if we take on the job must be committed to completing them.

Furthermore, these roles are placed in a definite arrangement with chains of responsibility and

authority which must be taken into account before any action can be taken in the collective's name. A dock worker at a warehouse cannot purchase supplies for the warehouse without permission from the supervisor. Supervisors have a budget to work with that can only be altered by permission of whomever is their immediate boss. There is always some latitude for individuals to take initiative, but the scope of this initiative is constrained by the job description and its place in the collective's hierarchy.

All of this severely restricts what any given individual may or may not do, at least in the name of the conglomerate. In such contexts individuals do not have the luxury of doing whatever they desire. It is true that they also might autonomously have chosen to follow this course, but this is largely incidental. Simply because the choices of the individual and the choices of the collective are coextensive does not mean that the actions of the collective can be redescribed as an autonomous action taken by an individual member of the collective. In any case, most of the time no individual can, as an individual, even perform the complete action to which he or she contributes as a member of the group. Therefore, since certain kinds of collectives, conglomerates, can be said to have both an identity which exists through time, and a capacity to act, the initial conditions for talking about trusting a collective are met. Before turning to how one can ascertain the attitudes of a collective it will be necessary to narrow the kinds to be considered.

Section Three: Ascertaining a collective's attitudes

Limiting the analysis to organizations and professions

If by a human collective one simply means a grouping of two or more people then families, nations, governments, small businesses, legal systems, cultures, giant corporations, religions, and so on all constitute collectives. Obviously, it would be impossible to examine the question of whether or not we can trust a collective without restricting the analysis to a specific sort or sorts of collectives as opposed to collectives in general. To accomplish the latter would require a general theory of the collective and it is not even clear that such a theory is possible. Moreover, French's analysis is most easily understood with regard to corporations, which are a special subset of collectives commonly referred to as formal organizations.

Since the difficulty in considering trust and collectives lies primarily with determining the good will

of collectives, I will start this section by delineating how we can ascertain the attitudes of organizations. Either of the following two will suffice as definitions of the term "organization."

Definition 1 (from Webster's Third International): a group of people that has a more or less constant membership, a body of officers, a purpose, and usually a set of regulations. Examples: professional associations (e.g., American Medical Association, American Bar Association), political parties (e.g., Democrats, Republicans, Libertarians), government agencies (e.g., police departments, IRS, environmental protection agency, Food and Drug administration, fire departments).

Definition 2 (from Richard Hall): An organization is a collectivity with a relatively identifiable boundary, a normative order, ranks of authority, communications systems, and membership coordinating systems; this collectivity exists on a relatively continuous basis in an environment and engages in activities that are usually related to a set of goals; the activities have outcomes for organizational members, the organization itself, and for society.¹⁴

How do we discover the beliefs, convictions or dispositions of an organization, since as Werhane correctly points out, there isn't an entity that we can simply ask? Even though organizations are obviously different from individuals, there are similarities in how one discovers the attitudes of each. The following sections examine four different ways in which an organization may express attitudes about a topic: through its goals/purposes, its moral codes, its political positions, and its patterns of behavior.

An organization's goals/purposes reveal its attitudes

One way we have of ascertaining other people's attitudes toward something is by knowing their goals and priorities in life. What is it that they hope to accomplish in life? Is there a task which they view as giving life purpose and meaning? The priest whose calling is the saving of souls, the scientist whose professional goal is to uncover the secrets of the universe, the journalist who wants to pursue truth, are all revealing their attitudes. In knowing these goals and purposes it becomes easier to know what their attitude will be regarding a particular subject.

In a similar manner we can detect the attitudes of an organization by exploring its goals and purposes. Organizations are created by people coming together to meet certain needs which they see more likely to be satisfied by co-operative effort than by operating alone. As Talcott Parsons points out, the "...primacy of orientation to the attainment of a specific goal is used as the defining characteristic of an organization"¹⁵ Any given organization may have a number of different goals operating at various levels of generality. There are the fundamental goals of the organization as laid out in their charters, statements of purpose, and founding

principles. In pursuing these central goals the organization will also have several short term goals of varying significance. Some goals will be necessary for the long term survival of the organization, and some will be strategies for improving its present standing.

Not all of the goals of an organization are limited to promoting the interests of its membership. In the case of the Ku Klux Klan, the explicit goals of the organization are the furtherance of a racially separate society and protection of the interests and rights of white Anglo Saxon Protestants in the United States, regardless of whether those caucasians agree with the Klan or its methods. The Sierra club seeks to protect the environment and preserve land for future generations to enjoy whether they agree with its policies or not. Sometimes the goals of the organization are focused almost exclusively on advancing the interests of its membership. The AFL-CIO seeks to further the interests of its membership and only peripherally to promote the interests of laborers in general. The VFW seeks to help its membership in obtaining pensions, health care, life insurance, and it does not focus on doing this for the population as a whole.

The nature of organizations often makes it easier to establish their attitudes toward a particular subject than it might be in the case of an individual. Few of us actually ever have highly explicit defining goals and purposes. Many people drift without a strong sense of purpose and as a result it is often hard to grasp what they will do next. This makes some sense since human beings are not created in order to fulfill a single or definite purpose or goal and so do not have overarching goals from their inception. However, organizations are created to achieve particular goals and purposes and are seldom without a clearly defined set of goals at any given point in time.

Two objections to the "goals" criteria

For some thinkers, like Parsons, the key to understanding an organization is through its explicitly stated goals which manifest themselves in short and long term strategies. Other writers who contend that the goals of the organization are only a part of the picture, such as Amitai Etzioni or Charles Perrow, still view the goals of an organization as at least one component to be considered, if not the most important.¹⁶ However, some writers argue that it is unproductive to use an organization's stated goals or purposes as a means of learning anything substantive about it.

First, they point out that it is frequently the case that an organization's stated goals are often wildly contradicted by the actual behavior of the organization. Utilizing work by Barbara and John Ehrenreich, Graeme Salaman makes this point with regards to the health care system.

...the Ehrenreichs argue that the concept of 'a health crisis is only problematic as long as it is assumed that the health system exists to improve or look after the health of Americans, in which case its 'inefficiency' is surprising. But these authors argue that the 'health' system is oriented towards profit-making and that in these terms, "...the health industry is an extraordinarily well-organized and efficient machine.."17

With such pronounced discrepancies it sometimes becomes difficult to say what actually constitutes the organization's goals, and hence, it is difficult to ascertain what constitutes the organization's true attitudes. Should the stated goals still be the central guide and the discrepant behavior interpreted as simply a deviancy? Or should the actual behavior of an organization be the source of understanding an its attitudes, and its stated goals seen simply as a smokescreen adopted for strategic convenience?

A second critique is that it is an ahistoric myth that organizations originate because a collection of people form a social contract in order to pursue a specific goal or goals. Within any specific group there will be a wide variety of goals which various members seek to realize, and these may or may not have anything at all to do with the goals of the group. Eric Hoffer argues in **The True Believer** that the desire of people to lose themselves in collectives often stems from their own sense of inferiority, ineffectiveness, and/or lack of personality. For such people the specific goals or purposes of the organization are less important than their own desire to belong to a powerful unity.

When people are ripe for a mass movement, they are usually ripe for any effective movement, and not solely for one with a particular doctrine or program. In pre-Hitlerian Germany it was often a toss up whether a restless youth would join the Communists or the Nazis. In the overcrowded pale of Czarist Russia the simmering Jewish population was ripe both for revolution and Zionism. In the same family, one member would join the revolutionaries and the other the Zionists.¹⁸

While both these criticisms have merit, similar arguments could be raised against the possibility of inferring an individual's attitudes about a topic from their stated goals and objectives. Individuals are frequently inconsistent and insincere. People often make public declarations which they then undermine by their actions. Sue might loudly state that she is a life long Democrat but each election secretly vote a straight

Republican ticket. Two brothers swear they will work together to build a family business and one of them sells his interest the moment he can realize a significant profit. This is why it is necessary to compare stated goals and purposes with patterns of behavior.

While it is true that such discrepancies may make it difficult to discern the attitudes of individuals about a given topic, this incongruity is itself a valuable bit of information. Such discrepancies between proclamation and action do a great deal to establish a fuller understanding of the individual. If it happens only very rarely we may let it pass. People who diverge from their public proclamations on a regular basis are not to be taken at their word; such consistent insincerity is evidence of a loose attitude toward the truth. If an individual sometimes follows through on what they say they will do and other times fails, then our judgement will be dependent upon the circumstances surrounding the breaches. Was there a good reason for the lapse? Was it a matter of survival? Was the person going to try rectify the situation at a later date? People usually give reasons for their actions, and these give a further clue as to their attitudes about the topic.

The same can be said for organizations. We cannot simply take its stated goals and purposes at face value. We need to compare these with its pattern of behavior. If a political party regularly proclaims itself to be a supporter of equal opportunity for all members of society but consistently submits legislation that benefits only a small portion of the society, this can be taken as good evidence about the nature of the organization. Barring some sort of reasonable explanation, we conclude that it is not to be taken at its word, it is not genuinely concerned with all members of society. If an environmental organization's founding charter says that it is only concerned with protecting U.S. forests, and it becomes involved with a number of animal rights groups, it becomes necessary to delve into the reasons for the apparent deviation. Was it only a temporary political strategy? Was it the start of a new approach for the organization? Like individuals, organizations give reasons for their actions, and these reasons provide clues to understanding the organization's attitudes.

A similar sort of response can be made to the objection that organizations are formed by people for a variety of reasons and motivations that may not have anything to do with the stated organizational goals. A lawyer joins the ACLU because of a desire to defend the constitution but also to have interesting colleagues and tackle exciting cases. Students go to school to pursue an education and for the diploma, to meet people, to help them get a job, to prove something to themselves. Having a number of reasons for pursuing a goal does

not mean that this goal is worthless as an indicator of the person's attitudes.

The same holds for organizations. The fact that a number of people may join a union for reasons which are not identical to the stated goals does not mean the union has no goals or purposes. It may be that there are members who are in a union only because it is necessary to get a job or only because their relatives told them they ought to. However, as long as a fair number of them at least partially believe in the stated goals of the union, then these stated goals can be said to be reflective of the union's attitudes. If all or a vast majority of the members do not believe in the stated goals and purposes of the union, then these would be worthless as indicators of the union's attitudes. However, it is hard to see how such an organization could survive for any length of time; it would collapse when it met any serious challenge.

Having goals and purposes allows us to know something of the intentions of the organization, what it is likely to do in any given situation, and how it will react to new developments. The more clearly its goals and purposes are articulated, and the more consistently it sticks to these, the easier it will be to determine the organization's attitude toward a particular topic.

Ethical codes of an organization

Another means of learning about an individual's attitudes is by knowing his/her ethical views. When trying to learn the attitude of other people toward some topic it is common to inquire about their moral code. In deciding to trust Scott with her paper Maggie takes into account his ethical framework. Is he an ethical egoist? Does he think that plagiarism for career advancement is appropriate under certain circumstances? When Maria is deciding whether to trust Sue to give her advice about her sex life with her boyfriend, she considers whether Sue is malicious or mean spirited. Will she make fun of her or break her word to keep the talk to herself?

A similar approach is possible with regards to organizations. One way in which organizations evince moral stances is via an internal code of behavior, either expressed explicitly in an ethics code or implicitly as part of an "organizational culture". An increasing number of organizations have instituted written codes of behavior which they dictate to the members of their collective. These are the ethical convictions of the collective since these codes apply only to its own members. Violators are punished by the collective either

through disciplinary action or expulsion from the collective.

Congress has a number of rules (e.g. what constitutes appropriate contact between various branches of the government, the sorts of gifts one can receive from constituents) that are meant to hold federal administrators and congress members to a high ethical standard. Hospitals have ethics codes that are meant to delineate appropriate behavior for both practitioners and patients. Many universities and colleges have codes about teacher/student dating, about how to assign authorship for collaborative work between graduate assistants and professors, and about what can be said in the classroom. The NCAA has a number of regulations governing a wide range of activities: how members may recruit athletes, what grades the students have to maintain, the relationship between alumni donations and athletes, what constitutes drug abuse. The military has a strict code governing interactions between officers and enlisted men and women.

Sometimes these codes of behavior are informal. Much of the "organizational culture" literature in sociology is devoted to uncovering the unstated, but highly influential, ethical norms of organizations. For example, if two members of an organization have problems with each other they are supposed to work it out between themselves first, before either member goes to their superior. A person who has a complaint and immediately takes it to their supervisor is diminished in the eyes of fellow workers and may be punished by a loss of support on a future project. Even honest police officers have such loyalty toward their fellow officers that they may participate in a cover up to protect those who engage in illegal activities.

Such ethics codes are not simply more particular manifestations of general legal prohibitions since the violations involved are often not prosecutable in a regular court of law. Some organizations even sanction breaking the law because their ethical framework demands it. Members of the Aryan Nation have shot federal officers, stolen munitions, robbed banks, all with the support of their organization. The gay rights group ACT UP frequently engages in illegal activities such as blockading the NIH building, disrupting conferences, and stealing medical documents. Some fringe groups of the Right To Life organization have argued that it is acceptable to shoot doctors and their escorts in order to protect unborn children. In each of these cases the organization embraces ethical standards which conflict with those of mainstream society.

As in the case of the stated goals and purposes of collectives, these codes cannot be taken at face value. The sincerity of the collective's belief in these standards can be measured by its patterns of behavior. It

would be hard to accept that a university that repeatedly and publicly denounces plagiarism, but retains faculty members who are found guilty of such acts, genuinely believes in those codes. Once again, we would have to examine the reasons and justifications offered by the collective before we reached any final determination.

Political viewpoints of collectives

Our political views are another important indicator of our attitude on some topic. Frances's attitudes about Republican plans for health care reform will be easier to predict if we know whether she is a Democrat or a Republican. If Scott is an ardent Communist Maggie will have a better idea of what his attitude is going to be toward her paper than if his political opinions are unknown. Knowing that Sue is an activist in the feminist movement may help in deciding what sort of artwork she would like or what sort of music would appeal to her. If Gary has a strong libertarian streak it will probably be easier to discern what his attitude will be toward government efforts to ban the sale of handguns.

Because most organizations have specific goals and purposes, it is usually easier to determine an organization's orientation to a political issue than that of an individual. Organizations issue position papers on various political issues, run announcements about government proposals they support or reject, and lobby legislators on behalf of bills they want passed. The League of Women Voters will examine in detail all the ballot proposals on a state or national level and then issue a paper indicating their recommendations for the vote. The ACLU will actively support those bills which it believes to be most conducive towards its goal of protecting the constitutional liberties of Americans.

Numerous organizations will explicitly endorse political candidates, target others for negative campaigning, make large campaign contributions, and supply workers for elections. The National Rifle Association identifies all senators, congressmen, and governors who have supported bans on assault weapons bans. It then tries to defeat them and replace them with politicians more sympathetic to their viewpoint. Ralph Nader's consumer watchdog group keeps track of the voting records of congressmen and issues statements about who it deems the most irresponsible with regard to protecting the rights and interests of the American consumer.

It is true that there are several groups, like the League of Women Voters, that do not explicitly

endorse specific candidates. However, they refrain from doing so because it helps further the goals and purposes of the organization. They are not apolitical in the sense of having no political standpoint, rather the explicitly politically neutral standpoint adopted by the organization is necessary for furthering its goals and purposes. Furthermore, as in the case of the organization's goals and its ethical codes, its political viewpoints need to be compared to its patterns of behavior. Sometimes organizations deviate from their explicitly stated political positions, as the ACLU did when it publicly denounced Robert Bork's nomination for the Supreme Court. Such political actions from a group that had previously disavowed any political activities caused a great deal of controversy about and within the organization with respect to what it truly stood for.

Discerning if an organization has good will

These four factors are only some of the more easily ascertained and publicly knowable indicators of an organization's attitudes on a topic. An organization may also have specific scientific opinions which characterize it as in the case of Christian Science. It may have certain aesthetic commitments, such as the New York Museum of Modern Art, which would allow one to infer its attitudes. To consider the question of whether one can trust a collective it is necessary to establish that one can ascertain the organization's attitudes toward some topic. This can be done by knowing the components just discussed: its goals, its ethics codes, its political views and how these compare with its patterns of behavior. As defined above, 'good will' means having an attitude of appreciating, highly valuing, having affection for, respect for, or concern for either the person who is trusting or the trust object. If the arguments put forth in this chapter are correct, then organizations can be said to evince attitudes. These attitudes are knowable and the groups can act upon these attitudes. Because of this, it is acceptable to say that organizations can manifest some versions of good will. Whether an individual trusts an organization would be determined just as with trust between humans: by understanding what the individual believes to be the organization's attitudes toward the trust object in question, and by knowing how the individual stands in relation to the organization and the trust object.

As an extreme example consider the Ku Klux Klan. The attitude of the KKK regarding certain topics is fairly well understood from its charter, its corporate culture, its political and moral viewpoints. It seeks to preserve and promote the interests of white Protestant Anglo Americans and limit or reduce the rights, power

and influence of anyone else. It has a long history of approving of violence and oppression against African Americans. It has politically sought to undermine any assistance to minority groups and consistently championed public officials who shared these viewpoints. By knowing this about the organization we can determine that as African Americans, Jews, or Hispanics, we not valued, respected, appreciated, or liked by the organization.

Or take the AAUP, the Association of American University Professors. One of the primary goals of the organization is to defend the academic freedom and rights of its members. If a professor is dismissed without just cause from a university, the AAUP is supposed to launch an investigation to determine why this was done and whether or not legal action should be started against the university. The AAUP is thus presumed to respect and highly value American university professors.

This applies equally well to the notion of ill will. In the state of Michigan in the early 1990's the Michigan Education Association had a clear attitude toward the governor, John Engler. On the rare occasions on which the organization did cooperate with the governor, all its public statements made abundantly clear that this was only because the organization's goals and the governor's temporarily coincided. The rest of the public statements were dominated by acrimonious criticism and complaints about his policies. The MEA worked against the governor in all his races for public office, endorsing whomever it felt had the best chance of unseating him.

There may be a number of topics about which it makes no sense to talk about trusting or distrusting an organization, because one simply cannot know what the attitudes of the organization are on the topic. To ask whether or not one can trust the ACLU with regards to resolving health care makes no sense; this is not a topic to which the American Civil Liberties Union speaks.¹⁹ Perhaps it will in the future, but thus far health care reform has not been a topic which the ACLU feels falls within its domain. Note that this is not because individual members of the ACLU are indifferent to or hostile to health care reform. Rather, it is that this is not the sort of topic toward which the organization, qua organization, has demonstrated an attitude.

It is often the case that to know whether or not an organization manifests good will toward a person requires an awareness of the nature of the relationship between the vulnerable party and the empowered party (or the attitude of the empowered party towards the trust object). Without knowing this it may be impossible

to determine what actions the organization will take and why it is engaging in them. If there were an organization whose stated purpose was the promotion of safety in day care centers in Michigan, but which was really a front for a child pornography ring, a number of the organization's actions might seem puzzling. Once the attitudes have been determined the vulnerable parties have the necessary information about where they stands in relation to the organization. The crucial point is that the more clearly the elements are articulated and understood, the more one can talk about trusting or distrusting an organization. The more amorphous and unclear these components are the less it makes sense to speak of trusting an organization.

Can we trust a profession?

An interesting difference between organizations and professions is that while almost everyone accepts that organizations exist there are many who believe that professions do not. Some have argued that it may be for the best to simply drop the term "profession" as signifying anything meaningful.²⁰ While this position is probably too extreme, the reasons for adopting it point to significant differences between professions and organizations. The following definition from Webster's Third International Dictionary captures a good portion of what philosophers and sociologists such as Paul Starr, Bernard Barber, Eliot Friedson and others have written about the nature of professions.²¹

A calling requiring specialized knowledge and often long and intensive preparation including instruction in skills and methods as well as in the scientific, historical, or scholarly principles underlying such skills and methods, maintaining by force of organization or concerted opinion high standards of achievement and conduct, and committing its members to continued study and a kind of work which has for its prime purpose the rendering of a public service.

There is, however, an important element missing from this definition. Most professions have the power to select who will be a member-- some form of certification or licensing is required before one can be recognized as a member of the profession. Admittedly, this is not a necessary condition for being considered a member of a profession (e.g., university professors do not require any specific certification), but it is true in most cases.²²

This condition is crucial in examining whether it is plausible to ascribe a trust relationship between an individual and a collective. If we can't tell if a person is an actual member of the collective, then we can't use our knowledge about that collective to form expectations about his/her behavior.

For many professions ascribing trust relationships is done along much the same lines as with regard to organizations. We look to the profession's goals and purposes, for its code of ethics, and for its political orientation to determine the attitudes of the profession toward the individual or trust object in question. A primary goal of physicians is to heal the sick and prevent disease. For lawyers it is to advocate for their client to the best of their abilities; for teachers it is to educate their students. Each of these fields also has a code of ethics that lays out what constitutes ethically appropriate relationships between the professional and a client.²³ Often these professions will try to influence legislators in order to promote the interests of its practitioners or advocate for greater protection for the profession's clientele. Once again, the more clearly a profession manifests some set of such attributes, the more sensible it will be to speak of trusting or distrusting it. The more vague or nebulous the field, the less reasonable it will be to speak of trusting or distrusting it.

It is because of these factors that one can speak of trusting or distrusting doctors, *per se*, but not of trusting or distrusting construction workers. Like being a good doctor, being a good construction worker requires learning, hard work, natural skill, and a sensitive touch. However, there are not organizing principles for construction workers in that sense just discussed, so it makes no sense to say that there is any collective for a given construction worker to be the representative of. There is no code of ethics for construction workers, no specific goal or purpose to which all construction workers are meant to adhere in virtue of their status as construction workers, and no political orientation one takes simply because one has taken the role of construction worker. It may be the case that one day a large number of construction workers decide to create such a set of organizing principles and create a profession, but that is not how it presently stands.

Problems with the idea of trusting a profession.

In some ways the approach to understanding trust between an individual and a profession follows along much the same lines as that suggested in the case of organizations. First, we establish the attitude of the profession with regards to a particular trust object and then determine how this affects us. However, due to the differences between organizations and professions, there is, in many situations, a greater difficulty in ascertaining the attitude of a profession about a topic. This difficulty in delineating a profession's attitude means that understanding the nature of a trust relationship between an individual and a profession will be

harder than in the case of an individual and an organization. This is ironic since the professional/client relationship is often considered to be one of the paradigmatic cases of a trust relationship in society.

To help sharpen what is at stake here let us reconsider the two medical ethics issues raised earlier that involved trusting collectives. Should the AMA be trusted to handle health care reform and should African Americans trust doctors enough to sign organ donor cards? It is easier to see how to answer the first question than it is the latter. First, consider the public statements that mark the organization's attitude toward health care reform. The AMA puts out explicit policy statements regarding its goals for health care reform, it makes reference to its ethical commitments, and it publicly supports one bill over another. All of this can be compared to its patterns of behavior. Investigative questions can then be asked. Has the AMA changed significantly since Richard Harris's analysis?²⁴ Does the AMA contribute to senators who are actually obstructing reform? Are the amendments it seeks to add motivated more by concern with its own interest than by concern for health care reform? In answering these questions we can decide whether to trust the AMA with designing, and implementing health care reform.

It is harder to engage in the same sort of investigatory process for professions. Thus, it is harder to know what to say in the case of organ donation and trusting doctors. Clearly, reluctance of African Americans to become organ donors harms those members of the African American community who suffer from organ failure. Should this attitude of distrust be encouraged or discouraged? What is it founded on? How justified is it? One critical reason it is difficult to know how to answer these questions (or even how to investigate them for that matter) is that it is difficult to ascertain a profession's attitudes, especially on political issues. While it is easier to know what political viewpoints are held by the IRA or the ACLU or even the Ford Motor Company, it is harder when it comes to doctors or lawyers. It is not possible for the class of doctors or clergy or lawyers to speak with one voice about a political issue as it is with organizations. Partly this is due to the fact that professions do not have the same sort of explicit hierarchical ordering recognized by all members as legitimate. There is no board of governors or trustees or shareholders who are authorized to make public statements in the name of the profession.²⁵

A second problem is that professions are not structured in the same way as organizations, and on a large number of subjects professions are not able to coordinate the actions of their members as rigorously. If

an organization is presented with a problem in its behavior, it can, if it so chooses, initiate actions to rectify the problem. In contrast, the organizing principles within a profession are generally focused on the nature of the professional/client encounter. As such, to alter the profession's approach to some problem frequently entails a rethinking of the nature of the professional/client relationship. This is not the sort of process that can be quickly constructed or initiated. It takes longer for professions to grasp problems and longer for them to act upon those problems.

This lack of co-ordination among a profession's members makes it harder for us to know what to expect from them on certain topics. African Americans have been mistreated by doctors in the past. Doctors have denied African Americans access to hospitals, given them second class treatment, prevented them from entering medical school and conducted experiments on them that they probably would not have done on caucasians.²⁶ These are the patterns of behavior they have seen exhibited by doctors. If African Americans are to trust doctors they would need to know that doctors strongly reject such past racist practices. Furthermore, African Americans would need to know that doctors, as a profession, have taken steps to redress these practices and make sure the members of the profession do not engage in them. If this were widely known, then African Americans might have reason to reassess their present disposition toward organ donation. Without knowing whether doctors are committed to their needs, are taught to understand the special problems of their communities, and are not indoctrinated with racist agendas, then African Americans will be lacking crucial information for making a decision on trusting.²⁷

All this does not mean that we cannot speak of trusting professions. It does mean that we will need to think carefully about what sorts of issues involving trust are better handled via organizations than at the professional level. I will return to this question at the end of Chapter Five.

Concluding remarks to Chapter Three

In these first three chapters we have seen some of the reasons why trust is important, distinguished it from related concepts, and seen some of the possibilities and limitations in employing it with regards to collectives. Even though I have frequently alluded to the presence of a number of ethical issues tied in with trust, thus far, this has largely been an exploration of the metaphysical and epistemological aspects of trust.

Having completed the basic analysis of what is meant by the term trust it is now possible to begin exploring some of the moral dimensions of trust.

ENDNOTES

1. Richard Hall, **Organizations: Structures, Processes, & Outcomes** (Englewood Cliffs, New Jersey: Prentice Hall, 1991), p.32.
2. Richard Harris **A Sacred Trust**, (New York: New American Library, 1966).
3. MHC stands for the major histocompatibility complex which is the group of genes largely responsible for producing the antigens that allow the body to recognize what constitutes a foreign substance. Studies seem to suggest that there is greater difficulty in transplanting organs between caucasians and African-Americans than between African-Americans. See: Wayne Arnason, "Direct Donation: The Relevance of Race," **Hastings Center Report** 21 (1991): 13-19; and Sonia Baker, "African Americans and Participation in Kidney Donation: Selected Issues," **African American Voices: African American Health Educators Speak Out**, (New York, N.Y.: National League for Nursing Press, 1995), pp.10-27.
4. Sonia Baker, "African Americans and Participation in Kidney Donation: Selected Issues," p.15.
5. Virginia Held, "Corporations, Persons, and Responsibility" in **Shame Responsibility and the Corporation** ed. by Hugh Cutler, (Haven Publications, 1986): 159-182.
6. James Coleman, **The Asymmetric Society** (Syracuse, N.Y.: Syracuse University Press, 1982).
7. All definitions from **Webster's Third International Dictionary** (Springfield Mass: G.&C. Merriam Company, 1976).
8. Patricia H. Werhane **Persons, Rights, & Corporations**, (Englewood Cliffs, N.J.: Prentice Hall Inc. 1985), p.50.
9. David Wiggins, "On Being in the Same Place at the Same Time," **Philosophical Review**, (January 1969): 90-93.
10. Manuel G. Velasquez, "Why Corporations are not Morally Responsible for Anything They Do," in **Contemporary Issues in Business Ethics** ed. Joseph R. Desjardins and John J. McCall (Belmont, CA: Wadsworth Publishing Co., 1990), p. 118.
11. It is true that we can autonomously elect to help realize the goals of a collective. This autonomous choice however, is largely irrelevant to the fact of the collective taking that action. The collective, as such, does not necessarily require our assent to take the action.
12. Peter French, **Collective and Corporate Responsibility** (New York: Colombia Press, 1984). French is primarily concerned with questions surrounding a special sort of collective, namely business corporations. However, much of his analysis is useful in considering other types of organizations as well as professions.
13. **Ibid.**, p.14.
14. Richard Hall, **Organizations**, p.32.
15. Talcott Parsons, "Social Systems," in Oscar Grusky and George Miller, **The Sociology of Organizations: Basic Studies**, (New York: The Free Press, 1970), p.75.

16. Amitai Etzioni **Comparative Analysis of Complex Organizations**, (New York: The Free Press, 1961); and "Two Approaches to Organizational Analysis: A Critique and a Suggestion," **Administrative Science Quarterly** 5 (Sept 1960): 257-278 reprinted in **Classics of Organization Theory** eds. Jay Shafritz and Philip Whitbeck (Oak Park, Illinois: Moore Publishing Company, 1978), p. 135-149; and Charles Perrow, **Organizational Analysis: A Sociological View** (Belmont CA: Brooks/Cole Publishing Company, 1970).

17. Graeme Salaman, "Classifications of Organizations," **Control and Ideology in Organizations**, ed. Graeme Salaman and Kenneth Thompson (Cambridge Mass.: MIT Press, 1980), p.70. The work by the Ehrenreichs he is citing is: John Ehrenreich and Barbara Ehrenreich, **The American Health Empire: Power, Politics, and Profits** (New York: Random House, 1970).

18. Eric Hoffer, **The True Believer: thoughts on the nature of mass movements** (New York: Harper and Row, 1966), p.17.

19. It may also not make sense to trust the ACLU because one does not believe it possesses the requisite competence to cope with the subject, but this is a separate reason for saying that trust is not applicable here.

20. Cf. Allen Buchanan, "The Physician's Knowledge and the Patient's Best Interest," in **Ethics, Trust and the Professions**, ed. Robert Veatch, Edmund Pellegrino, and John Lagan (Washington, D.C.: Georgetown University Press, 1992): 93-112.

21. Cf. Paul Starr, **The Transformation of American Medicine**, (Basic Books/Harper Press, 1982); and Bernard Barber, **The Logic and Limits of Trust** (New Brunswick, N.J.: Rutgers University Press, 1983); and Eliot Friedson, **Professional Powers: A study of the Institutionalization of Formal Knowledge** (Chicago: University of Chicago Press, 1986).

22. Although, even here the exceptions are rare. To have a university professor without at least a masters degree is now extremely rare. While the process of certification is not as explicit as it is in the field of medicine a strong argument could be made that it is as stringent.

23. I am using the term "client" to refer to the party seeking assistance from a professional whether the professional is a teacher, a physician, a lawyer, or whatever. Unfortunately, this can be potentially misleading since client is typically the term used to refer to a person who is represented by a lawyer (as opposed to patient for a physician or a student for a teacher). I do not intend by my use of this term to indicate that all professional/client relationships are modeled after that of lawyer and client.

24. Richard Harris, **A Sacred Trust**.

25. There may be organizations that claim to represent the professions but if the membership of the two collectives are not co-extensive it becomes harder to say the organization is truly speaking for the profession. In 1964 70% of U.S. doctors were members of the AMA, but that figure fell to 40% by 1993. Therefore, while it might have made sense to say that the AMA spoke for doctors in 1964 it is more problematic to make a similar claim in 1994.

26. Cf., James Jones, **Bad Blood: The Tuskegee Syphilis Experiment** (New York: The Free Press, 1993); and David McBride, **From TB to AIDS: epidemics among urban Blacks since 1900** (Albany: State University of New York Press, 1991); and Edward Beardsley, **A History of Neglect: Health Care for Blacks & Mill Workers in the Twentieth-Century South** (Knoxville: University of Tennessee Press, 1987).

27. There are other interesting differences between trust with regards to organizations and professions. There are those that stem from the debate surrounding what constitutes a profession. Most people accept the field of medicine and law to be professions, but what of public administration? Auto mechanics? What of tailoring? Cooking? Airline pilots? Politics? Advertising? Is there a way to discriminate between having a profession, as opposed to having a vocation, or simply being highly skilled? Bernard Barber has argued that it can be seen as a matter of degrees, some fields are clearly professions now and other fields are moving toward becoming professions. The more that a particular field manifests the characteristics given above the more it can be thought of a profession and not simply a job.

This is a sensible strategy but it raises a different set of difficulties in determining the trust relationship with regards to some specific individual who claims to be a representative of some field. Without a clear demarcation point it is not obvious when an individual becomes the legitimate representative of a profession since it may not be clear that this field has yet even earned the right to be called a profession. If public administration is more and more becoming a profession at what point does one say, "Aha, now this person here is a legitimate representative of the profession and so it is reasonable to have certain beliefs about her attitudes and competency."

Another source of the difficulty lies in the problem of identifying the collective in question and determining who should count as a member of it. Organizations have the advantage that it is in their nature to be self-identifying. The organization, in coming into existence, will determine what the goals, purposes and functions are of the organization and therefore who should count as a legitimate member. An organization's charter, by explaining what the goals and purposes are of the organization, delimits the boundaries of the collective. Furthermore, these limits are usually accepted by others as a legitimate means of ascertaining who does and doesn't belong to the organization. People receiving a check from IBM and performing some sort of work for the corporation, then, are members of that organization. Even if one disagrees with the corporation and all it stands for, one is likely to accept this as an adequate method of certifying who is a member of that collective. Furthermore, organizations can be differentiated from each other by the charter or organizing principles. The Urban League can be differentiated from the NAACP even though they have many of the same goals, and overlapping membership. There are clear ways of establishing who is a member of one versus another.

Contrast this with the professions. Chiropractors or acupuncturists may view themselves as members of "the healing profession", and therefore as significantly similar in many ways to an M.D. or an R.N. While they would not claim to be a nurse or a doctor, that is not what they consider to be the relevant categorization for them when considering their professional status. The relevant characteristic is whether or not they are actively engaged in the healing arts and have some measure of success at it. In this sense a chiropractor may regard M.D.'s as legitimate members of the healing profession because there are many situations where M.D.'s can successfully heal a patient and the chiropractor cannot. However, there are many M.D.s who do not have a reciprocal attitude toward chiropractors, viewing them as quacks and charlatans. So two people can have entirely divergent attitudes on their respective status in a profession. The M.D. sees no connection between what she/he is doing and what the chiropractor is doing and denies that they belong to a similar group. Chiropractors see both as belonging to different subgroups of a linked profession. It becomes difficult to know whether or not trusting makes sense since it is not always immediately clear to what group the practitioner sees him/herself belonging.

Part of the problem is that the term "professional" is a highly complimentary one and "belonging to a profession" carries with it a certain social standing. Aside from being wealthy the best way to set oneself apart from the lower classes is by being a part of a profession. The term denotes education, skill, a commitment to high quality, independence, having special talents that most people need but can't supply themselves. It is because of these cultural factors that one finds all sorts of practitioners outside of the more traditional four professions claiming that their area of expertise is a profession. For some people it has come to mean simply a high degree of competence in some particular kind of work, as in, for example, the expressions professional baseball player or professional musician.

CHAPTER FOUR

EXPLORING SOME MORAL DIMENSIONS OF TRUST THROUGH TRUST RELATIONSHIPS AND TRUST VIOLATIONS

Who has not been betrayed or betrayed someone? Betrayal is so common that its scope can scarcely be imagined. It is the main theme of our literature and history. Perfidy stalks through our greatest poetry and prose. If we were think only of infidelities in marriage and politics, we would be overwhelmed by their number and variety, and yet they are only a part of the full range of possible treacheries.

Judith Shklar¹

Introduction

I now move from conceptual and metaphysical questions about trust to an examination of its ethical dimensions. This is no small task, for in considering where to begin such an examination we are provided with an embarrassment of riches. The connections between trust and ethics, both at an interpersonal and a societal level, are varied and deep. When we begin to consider the moral dimensions of trust we find that there are a number of possible approaches.

For example, we could explore the concept of trustworthiness. Is being trustworthy a virtue? Depending upon how we answer this question, we could further explore the centrality of trustworthiness and how it is related to other classical virtues such as honesty, kindness, love, and charity. Moreover, there would be a number of related questions about to whom we should be trustworthy and whether there are only certain things about which we are obligated to be trustworthy. Should producing trustworthy citizens be a central goal of a political system? There are also questions about whether trusting is itself a moral action. Some people have suggested that trust (or distrust) can be used for morally regressive purposes.² Others have argued that not trusting can be a sign of moral weakness.³ However, it may be that trusting everyone is a sign of moral shallowness. If there is a society in which trusting is viewed as a sign of immaturity or naivete does it tell us anything about the moral character of the society? We may find that such a lack of respect for trust is a sign of a morally corrupt society. What is the relationship between trust and the ethics of care? Some philosophers have argued that the issue of trust is deeply embedded in much of the work in recent feminist thought.⁴ Is trust a necessary element in any substantial feminist ethical theory? We may decide that given the present

conditions of society, it is both foolish and morally wrong for women to trust men. I could go on for pages listing the intriguing and weighty ethical questions raised by a thoroughgoing consideration of the moral dimensions of trust.

Probably any of these questions would be an equally good starting point. In picking up one of them we would eventually be led to consider the others as well. For a number of reasons I have chosen the issue of betrayal as my way of beginning this exploration of the ethical dimensions of trust. First, the ubiquity of betrayal and the intensity with which we each remember some instance of betrayal we have suffered or inflicted provides a common starting point. Second, as will be apparent as we progress through the chapter, the process of clarifying what is meant by betrayal inevitably leads to the subject of trust relationships. I believe that we can use what we learn of the nature and interrelationship of these two topics, betrayal and trust relationships, to create a framework for investigating issues involving ethics and trust within our daily lives.

The chapter is divided into three sections. In Section I, I will lay out the necessary conditions for calling an action a genuine violation of trust, thereby allowing us to distinguish those instances where trust has been merely disappointed from instances of authentic trust violations. A genuine trust violation is one in which trust is (1) justified, (2) acknowledged, and (3) disappointed due to neglect, indifference, or an intention to cause disappointment by the trusted party. What this shows us is that violations/betrays can only take place within the context of a particular kind of relationship, what I call a trust relationship. Any relationship that meets the acknowledgement and justification criteria is what I will refer to as a trust relationship. In Section II, I present a detailed listing of negative consequences of violating a trust relationship. From what we will have learned in the first two sections (as well as from Chapter One) we will see that trust relationships have significant moral weight and that a betrayal/violation is presumptively wrong. Moreover, the greater the role trust plays in the relationship, the greater the magnitude of the potential betrayal/violation. On the basis of these conclusions about the nature of trust relationships and violations/betrays, I develop a framework for exploring trust and ethics in such areas as medicine and teaching.

However, it is also important to see that not all trust relationships or betrayals/violations have the same moral standing. In Section III, drawing on the work of Judith Shklar and Peter Johnson, I present three aspects of betrayals/violations that must be taken account of when we evaluate the moral status of a trust

violation. I then critically examine Annette Baier's expressibility test as a means of evaluating betrayals/violations and conclude that it is not adequate. Both the failure of Baier's test and the complications uncovered by Johnson and Shklar provide us with a glimpse into the limitations to any systematic analysis of trust relationships and betrayal/violations.

Section I: What should count as a violation of trust?

There is a dissonance between feeling betrayed and actually being betrayed.
Judith Shklar⁵

Shklar's approach

When someone we trust disappoints us, we may feel more than simply let down or frustrated; we may also feel morally wronged. In Judith Shklar's insightful and stimulating essay on the topic entitled, "The Ambiguities of Betrayal," she explores a number of issues surrounding betrayal by considering a wide variety of examples from literature, theater, film, and history.⁶ In doing so she skillfully illuminates the complexities and ambiguities that abound when we sort through our feelings about betrayals.

Unfortunately, under the general rubric of betrayal, Shklar collects actions that have significantly different features. She nowhere produces a detailed discussion of what she means by the term "betrayal". The closest she comes is this: "For a simple act of betrayal, one person should have both intentionally convinced another person of his future loyalty and then deliberately rejected him."⁷ However, in her ensuing discussion she does not always pay enough attention to her earlier insight into the disparities between feeling betrayed and actually being betrayed. The characters she discusses are often people who merely feel betrayed, and this leads to some conceptual unclarity about how we should assess the alleged betrayal.⁸ Since "betrayal" is such an emotionally loaded term, I will reserve it for a special kind of action, a sub-category of a larger group of actions I will call trust violations.

Furthermore, if we accept Shklar's basic definition of "betrayal", not every situation where our trust has been disappointed can be properly classified as a betrayal. She is right to emphasize the deliberateness and intentionality of the trusted's violation as the salient features of betrayal. Yet it is probably far more common that trust is violated because of laziness or neglect on the part of those we trust, rather than by any conscious or

deliberate decision on their part. From the standpoint of the one who feels violated this may not make much difference: perhaps all violations feel like betrayals. But such a distinction does matter if we are trying to decide how to assess the ethical status of some action. There are three necessary features that distinguish a genuine violation of trust from mere disappointment. First, the trust must have been justified; second, it must have been acknowledged by the trusted party and third, the trusted party must be at fault for the disappointment through indifference, negligence, or intentional action.

Warrantedness and justification

I will begin by distinguishing the concept of "warrantedness" from that of "justification." If we say that trust is warranted toward another we are making a factual claim about the status of the good will and competency of the potentially trusted party. Warranted trust means that, as a matter of fact, it is true that the trusted party has the requisite competency and good will to successfully care for the trust object. To say that Joe's trusting Maggie to raise the kids in case he dies is warranted means that she possesses the requisite competency and the good will. She does, in fact, care, respect and love the children. She does, in fact, possess solid parenting skills such as patience, foresight, a sense of proper limits, good communications skills, etc. To say that Aunt Sue's trust of the Redi-care nurse practitioner with her nephew's health is warranted means that the nurse does, in fact, possess the requisite good will and competency to successfully care for Ken's health. She respects her patient and knows enough medicine to be able to accurately diagnosis and treat his ailment.

Trusting may also be unwarranted. In such cases the trusted party does not, in fact, possess either the good will or the competency to successfully care for the trust object. Joe might trust Maggie to raise the kids if he dies, but, in fact, the only thing that has allowed Maggie to be a successful mother all these years is Joe's support. If Joe were to die Maggie would suffer a mental breakdown and the family would fall into ruin. Trusting Maggie in such circumstances would not be warranted. Likewise if the nurse practitioner is an alcoholic and routinely performs examinations while drunk, trusting her is not warranted. She does not, in fact possess the requisite competency to be trusted with Ken's case.

Notice that since warrantedness only applies to what is in fact the case there can be a discrepancy between what we think of people and what is actually true of them. To distrust someone is to think that the

potentially empowered party does not have either the requisite good will or competency (or both) to be trusted. Sue might distrust the nurse practitioner thinking that only medical doctors are competent to deal with someone in Ken's condition. However, since Ken's condition is not that serious Sue's lack of trust in the nurse practitioner is not true to the realities of the situation.

Saying that trust is warranted is different than saying that trust is justified. The distinction, for lack of a better set of terms, is between epistemic and ontological claims. Warrantedness is concerned with the actual state of affairs that obtains, what in fact is the case. Justification is concerned with the epistemological status of trusting, what constitutes adequate grounds or reasons for trusting someone. When we are assessing whether someone is justified in thinking or doing something we are assessing the quality of the reasons they have for their belief. To say that a case of trust is justified means, at the least, that there are plausible grounds for believing that, in this particular circumstance, trusting will be successful. Obviously, a large problem lies in determining how to set standards for what constitutes justified trust. How do we measure what is meant by "plausible grounds" such that we could differentiate this from unjustified trusting?

One option is to state that a case of trusting is justified if and only if the trust is not disappointed. Suppose Maggie trusts Joe to find decent housing for the family while in Thailand, and he finds a place which is filled with cockroaches. Maggie and the children are miserable as they spend the entire year shaking cockroaches out of their clothes and toys. Do we say that Maggie's trusting was unjustified? To decide the question solely on whether there was a bad result from her trusting of Joe would be to employ far too stringent a standard. It would amount to saying that our reasons for believing something are only adequate if our belief is, in fact, true. A more contextually sensitive, agent-centered understanding of justification with regard to trust is required. This is necessary given that trust is a belief about the behavior and motives of people, and people are neither omniscient nor omnipotent. If someone trusts us, we want them to remember that, as limited beings with limited knowledge, we cannot anticipate or surmount every possible contingency. As a result of this they may be disappointed even though we have done all we could to care for the trust object. Imagine that Joe spends several weeks looking for the right house, talks to real estate experts, and checks out a number of houses before settling on one. He then calls for Maggie and the kids to come over, and while they're in flight a hoard of cockroaches moves into the basement. Maggie might be horribly disappointed in the house,

but it would be unfair for the family to blame Joe for this disappointment. In fact, to do so would be unfair on Maggie and the children's part.

Considering the problem from the trusting person's standpoint, we see another way in which justified trust must take into account human limitations. As potential trusters looking to others, we must realize that we can never be absolutely certain of another's motivations or competency. No matter how much we know about anyone's past, what they say they're going to do, what other people say about them, how they've been monitored, etc., our beliefs about them will fall short of perfect knowledge. Again, we might say that short of this perfect knowledge we should refrain from any trusting beliefs whatsoever, but this seems unduly restrictive. Maggie has known Joe for twenty years, he has spoken to many people who have traveled overseas before, they have discussed what sort of house they want and the price range they believe they can afford, Joe has demonstrated good common sense on countless occasions, and he has already consulted with real estate agencies. To say that Maggie is not justified in trusting Joe because she cannot be perfectly certain that in this instance he will be well-motivated or competent would be absurd.

It is unlikely that there exists any single objective standard for what constitute adequate, plausible reason for trusting someone else. However, we can distinguish between better and worse reasons for believing something. There is a spectrum of reasons and motivations for belief ranging from the completely irrational held by the insane to the sophisticated, rigorous theories of scientists. With regard to trust we can pick out at least two key features. First, there is the question of what skills and talents are, in fact, necessary for the trusted to be able to successfully care for the trust object. Notice that this may be different from what the truster believes to be the necessary skills and talents for success. Second, there is the question of what are the correct methodologies to determine whether the trusted party possesses the requisite skills or good will for warranted trusting. Again, this is a different matter from what the truster believes the correct methodology to be.

The first of these questions concerns what are, in fact, the requisite skills to be able to competently care for the trust object. To a large extent this will depend upon the nature of the trust object itself. If the trust object is a child there are certain skills (e.g., patience, an ability to be alert for the kinds of dangers a child can get into, the capacity for affection) that are not particularly relevant in analyzing a paper for a colleague (e.g., knowledge of the paper's subject matter, good editing skills). Knowing that a person possesses these sorts of

skills would constitute epistemic justification for trust. We can also see the point by considering the related question of what constitutes unjustified trusting. When there is a discrepancy between what are in fact the necessary skills and what the truster takes to be plausible grounds for believing that trust is warranted, we may have a case of unjustified trusting. A young woman might think that all it takes to be a good father is for a man to be a good lover. However, to use a criterion which is clearly not a necessary skill for child rearing, such as sexual ability, as the basis of trusting a man with the needs of raising a child, constitutes unjustified trusting.

Admittedly, it is unlikely that for any trust object it is absolutely clear what the best or complete set of required skills would be. Is there a set of skills necessary and sufficient for child rearing? For being a doctor? For being a teacher? What some may consider absolutely essential (e.g., a sense of humor) others might consider icing on the cake. Furthermore, there may be situations where what constitutes the appropriate sort of skills and competencies is a matter of some controversy. Some people believe that complete and total honesty is crucial to be able to trust one's marriage partner, and others would say that this is a recipe for disaster.

A second set of questions turns on what methodologies are employed to ascertain whether a potential trusted party possesses the requisite skill or good will necessary for caring for the trust object. There are better and worse ways of determining if someone possesses the requisite skills and goodwill. Learning the hair color or ear lobe sizes of prospective baby sitters will do nothing to tell us if they have the requisite skill and good will to care for a child. On the other hand, having references from people for whom babysitters have worked, knowing the babysitters' personal histories, and talking to them about what kinds of problems a baby can get into, are all sensible ways of ascertaining if they possess the necessary sorts of skills/talents. When we employ unreliable methodologies to determine if a potential trusted party possesses the requisite skills and good will for the care of the trust object, then our trusting is unjustified.

Therefore, there are at least two ways in which trust can be unjustified: (1) the type of skills and good will being assessed are unrelated to those actually necessary for the flourishing or care of the trust object or (2) the methodologies employed to determine if the potential trusted party has those skills and good will are not sensibly related to actually learning if the potential party possesses them. Once again, remember that we must separate assessing whether trust is justifiable from whether the trusting person believes it to be justified. A young mother trusting her baby's safety to her husband solely on the basis of his capacity to make the baby

laugh may think that she is justified in her trusting, but she'd be wrong. While this tells us what constitutes unjustified trusting, it still leaves us with the question of whether we can construct a standard for determining whether trust was justified. One possibility would be to say that if we establish that some trait, skill, or capacity is crucial to the care of a trust object and furthermore, we employ a method that is sensibly connected to discovering if the trusted party has that skill, then our trust in them is justified. I believe such a procedure would be acceptable in many situations, and I will attempt to demonstrate how it would work in Chapter Five and Chapter Six.

Finally, there is still the question of how much information we must have before our trusting is considered justified. Even if both the above conditions are met, trusting may not be considered justified if very little information is present. Is it really a case of justified trusting if we entrust our children to a day care center only on the basis of what one of our friends has said about it? Surely such recommendations constitute some plausible ground for believing that trusting is sensible in a situation, but it hardly seems sufficient. However, to go the other route and say that every contingency must be accounted for fails by setting the standard too high. It might be the case that one recommendation, if it is from the right person, is sufficient. We all have friends who are so meticulous that, if they have checked something out, we can be assured that it has been thoroughly investigated. With regard to what constitutes an adequate amount of information we are probably forced to the conclusion that it is highly context dependent.

Acknowledgment

Even though we may trust others it does not necessarily impose upon them any obligations to try to honor this. The fact that something is important to us doesn't mean that any other person need feel any obligation to have any respect, affection, or good will for us or our trust object. There must be some acknowledgement on the part of the trusted that being trusted is accepted; without such an acknowledgement it would be hard to say that trust had been violated.

For example, imagine that Joe hears that a casual acquaintance of his in the university's finance department has an excellent reputation for doing income taxes. He learns from those whose taxes he has done in the past that the acquaintance is a decent man, always willing to help out, and that he has an extraordinary

knowledge of the tax codes. So Joe puts all the Griffith's tax information in an envelope addressed to the man, encloses a generous check to cover his time, and sits back confidently, thinking he's through with the taxes this year. Clearly he has no just cause to blame this fellow when the IRS doesn't receive Joe's taxes, even though the man was certainly capable of doing all the work and may even have liked Joe.

Acknowledgement of a trust relationship may be either explicit or implicit. We acknowledge another's trust most obviously when we make promises. Promises often function as a way of explicitly saying to people, "You can trust me." Baier, drawing on Hume, makes the point this way,

In his famous account of what a promise (and a contract) involves, Hume strongly implies that it is an artificially contrived and secured case of mutual trust. The penalty to which a promisor subjects himself in promising, he says, is that of 'never being trusted again in case of failure.'⁹

This is a bit strong, though, for while all acknowledged trusting carries with it an implicit promise, not all promises involve trust. We may accept another's promise to do something and yet not trust them at all. We may rely on the fear the promisor has of our vengeance as the reason we accept their promise.

Promises are explicit, though limited, examples of an acknowledgment of trust. There are also relationships where the acknowledgment need not be made explicitly by the trusted party, but can be assumed in virtue of the social role they have adopted. It is in the nature of certain jobs, vocations, and professions that in adopting them we announce to those whom we meet that, in virtue of holding this position, we can be trusted about a certain range of things. For example, physicians, lawyers, priests, have all been historically characterized as making an acknowledgement that they can be trusted as part of their oath of office. As voluntary representatives of their various collectives they are announcing that the goals, social values, political viewpoints, etc., of the collective will be personally manifested by them. This was one reason why it was important to settle the conceptual question of whether it made sense to say we could trust a collective. The more clearly the features of the collective are spelled out, the more clearly we can know what constitutes the range of responsibilities that we can say are legitimately acknowledged by the collective or its representative. To distinguish this from promises, which are usually highly explicit, I will refer to this kind of acknowledgement as quasi-explicit.

Finally, there are also cases in which the acknowledgment may be deeply-implicit. Some

relationships have features that are integral to them, regardless of the social, cultural, or historical context of the relationship, because without these elements the relationship ceases to exist. Therefore, since these features are essential, if we voluntarily enter into this kind of relationship we make an acknowledgement of our responsibilities for the trust objects of that relationship. While delineating the exact features a relationship must have to be designated as one that automatically carries with it an acknowledgment of trust is a complicated question, I believe it could be done given adequate space and time. I suspect that such relationships are usually highly intimate ones that consist of a great deal of the following: a high value placed on the good opinions of the other party, an ongoing and extensive amount of discretionary power over a wide range of valuable items, and an escapable vulnerability.

Parents, lovers, and close friends would be three examples of relationships that entail a deeply-implicit acknowledgment of trust. To willingly become a parent is to accept a responsibility for the child and thereby acknowledge that the child should be able to trust us with their upbringing. To accept a friendship is to indicate to the other person that we may be trusted in such a relationship. To become lovers with someone is to acknowledge to the other that we may be trusted with their love.¹⁰ It is impossible to spell out exactly what such things as upbringing, love and friendship involve. Again, as in the case of justification, the best we can probably do is to carve out a range between two extreme positions. Friends don't blackmail each other to relieve their boredom, parents don't starve their children for pleasure. Furthermore, there may be set tasks, duties, responsibilities, and so on, that constitute the core elements of any of these kinds of relationships.

In any case, the degree of explicitness of acknowledgement can fall anywhere along this spectrum from the deeply-implicit between lovers about a wide range of trust objects to the highly explicit promise made by two relative strangers about one or two things. It is only if both the justificatory and acknowledgment conditions are met that a disappointed trust may (potentially) be called a violation of trust. Someone might argue that without acknowledgement it is not even justified trust, but I believe it's important to keep justification distinct from acknowledgment in order to be able to further distinguish where and how trusting may have gone awry. As the example of Joe and the finance professor shows, we may be correct that a person we trust meets both the competency and good will requirements, but unless he acknowledges the trust there can be no violation. Likewise, we may have a situation where a trusted party acknowledges being trusted, yet

because it was not justified any resulting disappointments would not be properly ascribed to the trusted party. A four year old boy may sincerely believe that he can be trusted to watch over his infant sister and sincerely assure his parents that they may take off for the evening. However, if the sibling forgets to feed the baby because he is distracted with his toys it is rightfully the parents who bear the blame. Believing that a four year old possesses the requisite skills for caring for a baby is a case of acknowledged but unjustified expectations.

Causal links

The last necessary condition for calling something a genuine trust violation is that the cause for the failure be the fault of the trusted party. It must be linked to either to some neglect or indifference or be due to an intentional decision on the part of the trusted party to disappoint the trusting party. As the example of Joe and the cockroaches demonstrates, we can have instances of acknowledged, justified trusting that go awry and yet are not violations of trust. Consider an alternative scenario in which, unbeknownst to Maggie, Joe is angry with her and secretly plots his revenge. Knowing that she hates cockroaches he calls up a Bangkok real estate agent deliberately looking for a house that has cockroach problems. He then signs an ironclad contract so they won't be able to move and tells Maggie to fly on over. Here Maggie's disappointment is directly linked to an intentional decision on Joe's part and as such constitutes a trust violation.

It is also a trust violation if the disappointment is due to neglect or indifference by the trusted party. Again, consider an alternative scenario where, instead of Joe's good faith effort to locate suitable housing, he simply picks the first house the real estate people show him, because he'd rather spend his spare time golfing. In this case he did not deliberately set out to disappoint Maggie's trust, but he failed to pay sufficient attention to the task he had been trusted with. He may not have wanted a house with cockroaches, nor did he want Maggie to be miserable, but it is his neglectful approach that is responsible for that result all the same. The intentional version is what we usually refer to as betrayal. The negligent version is less frequently discussed, although it may be the more common of the two.

It needs to be emphasized that the trusting party need not be personally cognizant of the trusted party's intentions or neglect for it to constitute a violation. If Maggie never finds out that Joe actively sought a house with cockroaches in it, she has nonetheless still been betrayed. In the 1960's and 1970's the Nestle

company sent market representatives into sub-Saharan Africa to promote their infant formula.¹¹ The representatives were able to 1) discourage the mothers from breast feeding their children and 2) persuade them to use the formula instead, in part because the sales people were dressed in uniforms that made them look like nurses. However, it was impossible for the mothers to purchase adequate quantities of the formula to support their children. The mothers who wanted the best for their children would spend what little money they had and thin out the formula to make it last. The dangers of such actions were never properly explained to the mothers. Infant mortality, already a serious problem in the area, shot up because the diluted formula did not provide adequate nutrition. Even though many of these mothers had their trust violated by these Nestle representatives, many of them were probably not able to make the connection between the company and the death of the babies. However, the inability on the part of the violated parties to make the connection does not diminish in any way the fact of the violation.

What this illuminates is that it is not incompetence that creates a violation of trust; instead it is abuse of the good will condition. We don't claim that surgeons have violated our trust if they are not qualified to do a particular surgery, but we do if they misrepresent themselves as being capable of doing it. Such misrepresentation is disrespectful and shows a lack of good will. We don't claim that our neighbors have violated our trust if they are unable, due to time constraints, to watch over our house, but we do if they accept the responsibility and then neglect it because they are bored with the job. As in the case of justification and acknowledgment, clear and bright lines are impossible to draw. Exactly how hard should Joe have looked? If the neighbor has a family emergency is he obligated to arrange for alternative care plans for the house?

Trust relationships

We are now able to differentiate between what constitutes an actual trust violation and what may only feel like one. An action is a trust violation only if (1) the trusting was justified, (2) the trust was implicitly or explicitly acknowledged by the trusted party and (3) the cause for the disappointment is either neglect/indifference or an intentional decision to disappoint the trusted party. These conditions may still not strike some as precise enough since, as we have seen, each admits of some inexactness. What is justified, what constitutes acknowledgement, and how strictly to assign causal responsibility are matters that require subtle

and sensitive investigation.

We are also able to see that such violations can only take place within the context of a certain kind of relationship: namely one where the trusted party has acknowledged being trusted and the trusting party has some justification for the trust. Wherever there is a trust relationship there is the potential for betrayal or a violation. As a consequence, trust relationships carry with them some moral weight. By acknowledging the trust of the other party, the trusted has helped to create a vulnerability in the trusted party that would not be there without this relationship. Because of this, the negative ramifications of a trust violation are morally attributable to the violator. In the next section I will present in some detail the nature and extent of these negative consequences. By our increased understanding of the nature of the relationship between trust and betrayal we are able to narrow our ethical investigations from simply any instance of trusting to only those that involve trust relationships. While the simple act of trusting does not, per se, involve any questions of ethics, trust relationships are different. Therefore, the first step in a systematic approach to examining questions involving trust and ethics will be to ascertain whether we are actually dealing with a trust relationship. Some might argue that this definition is too broad since it would include such diverse relationships as brief encounters among practical strangers to life long love affairs. While I admit that it does cover a wide range of kinds of relationships, I contend that this is a further illustration of how important a role trust plays in our lives and how easy it is to violate or betray a trust if we are not alert to the dangers.

Section II: Negative consequences of violations of trust

Trust is one of those mental phenomena attention to which shows us the inadequacy of attempting to classify mental phenomena into the 'cognitive', the 'affective', and the 'conative.' Trust, if it is any of these, is all three. It has its special 'feel' most easily acknowledged when it is missed, say when one moves from a friendly 'safe' neighborhood to a tense, insecure one. It has its (usually implicit) belief component, belief in the trusted's goodwill and competence, which then grounds the willingness to be or remain within the trusted's power in the way the distrustful are not, and to give discretionary powers in matters of concern to us.

Annette Baier¹²

Preliminary remarks

A good place to start an examination of the ethical status of a trust violation is to know what has been harmed. This section explores the nature and range of the consequences of trust violations. Most of us are aware that betrayals can cause great harm, that trust violations can be highly destructive, but what exactly is it that they destroy and how? In trusting we are empowering another to care for a trust object. If this trust is violated there will probably be some damage done to the trust object. However, the above quote by Baier captures some of the range of what is at stake when we trust and thereby what can be damaged beyond simply the trust object itself. Because of central role trust plays in our mental life, a violation has the corresponding power to affect negatively the way we view the world and to radically alter the way we interact with other people.

Unfortunately, most of the psychological literature on the effects of betrayal or trust violations has been focused on the effect of betrayal within parent/child relationships. While the parent/child relationship is one of the most significant relationships any of us will ever experience, it has its own particular dynamics. These particularities make it unreasonable simply to transfer the findings in the literature about the effects of trust violations within parent/child relationships to those between friends, doctor/patient, government official/citizen, and so on. What I will attempt in this section is to lay out some of the most general kinds of damage that occur, no matter what sort of trust has been violated: harms done to the trust objects; to the individual members of the relationship and lastly, as we consider the cumulative effect of such violations, damage to the society as a whole. Admittedly, the distinctions between these kinds of damage are not easily maintained. We mourn not only the loss of the trust object, but also what that object stood for in the context of

the relationship. We feel the effect of a violation at a number of levels; we simultaneously recognize that we have lost something personally and as a society.

Damage done to the trust object

A trust violation occurs because someone who was trusted with the care of a trust object either neglects to care for the trust object or maliciously attempts to damage it. Presumably what is damaged will vary according to the kind of relationship and the set of trust objects involved. As the narrative in the beginning demonstrates, possible trust objects are many and varied. A trust object may be a house, a child's health, a dog, money, etc. In case of violation the damage done to a trust object can range from the mild to the irreparable. In many cases the extent of the damage to a trust object is not very difficult to ascertain. If someone trusts us with fifty dollars and we spend it at the bar, we know exactly how much was lost. If Sam says he is going to look after the Griffiths' house and neglects to check the plumbing, the house may suffer extensive damage if the pipes burst.

Measuring the extent of the harm done in other situations may be difficult, given that the very nature of some trust objects are enormously complicated and difficult to articulate. How does one represent what it is that a friend is trusted with? We refer to our friendship and what that phrase covers is vastly complicated and amorphous. Within that friendship there are numerous features unique to that relationship that may be discovered only after the friendship is gone. This lack of explicit understanding of what is at stake does not make the objects of that relationship any less real. The trust object may even be something as difficult to articulate as the capacity for trust itself. Yet even here our inability to carve out what exactly this entails does not mean that the damage is any less real and discernable. Psychologist Erik Erickson argued that the capacity to trust forms the foundation for a person's healthy psychological state and that this is developed early on in an individual's upbringing. Without this capacity we are never able to fully develop a sense of identity which on this account is the cause of some of the most severe forms of psychopathology.¹³

Damage done to the relationship

The more important the trusting was to us the more destructive the violation becomes, although the magnitude of the harm is not necessarily measured by the value of the trust object alone. We may have a quite painful experience as a consequence of something fairly trivial. If I trusted my brother and his opinion of me matters a great deal, then a violation by him of my trust may profoundly hurt me. Thus, his malicious burning of a book of mine may be far more devastating to me than if he had accidentally wrecked my car. It is for this reason that the damage done to the trust object may often be less important to us than the damage to the relationship.

If Joe violates Maggie's trust and wants to maintain the relationship, he may have to go to great lengths to persuade her that the violation was anomalous or never to be repeated event. Even if the explanation is reasonable and plausible, it may still be the case that she will not trust him again. She may rely or depend upon Joe, but not trust him. Trust is not easily regained and even a sincere repentance may not be adequate. We may forgive but it is often impossible to forget. A sufficiently vicious violation may completely destroy the relationship making it impossible to ever put back together again. In Josephine Hart's novel **Damage** the protagonist engages in an affair with his son's fiancée. When the son catches them in flagrante delicto he accidentally falls to his death fleeing the scene of the discovery. The wife so hates the husband for the trust violation and the resulting disaster that she not only divorces him but curses at him, "You should have died. You should have died." Here the relationship is destroyed beyond any possible repair.¹⁴

The more significant the relationship, the greater the damage to the parties of the trusting relationship. When we have put a great deal of ourselves into such a relationship its destruction may do intense damage to our self-identity. Some would even go so far as to say that all or most of our identity is wrapped up in these relationships. Communitarian philosophers such as Michael Sandel and Charles Taylor have argued that this entity we think of as "ourselves" is the sum total of a set of relationships with other people. We are fathers, children, brothers, sisters, democrats, libertarians. A love, a friendship, a professional relationship, a political affiliation, a family member, any one of these may constitute a profound component in our own sense of who we are. As a teacher, whenever I come upon an instance of plagiarism or cheating in my class it causes me to reconsider my chosen field. Is it something in me that is responsible for this unethical behavior; am I somehow

tacitly encouraging these breeches? The damage is exacerbated by the fact that the relationship's demise is tied to a violation.

Damage to the trusting party

Beyond the damage to that specific relationship is the damage caused to the trusting party. Deciding whether to trust someone new may be difficult after being violated. How are we to know this person is different from those who have violated our trust in the past? It doesn't matter that it was the violator who abused our trust, we put the blame on ourselves. If only we had been more careful, more questioning, more skeptical. This skepticism decreases our capacity to believe in the good will of others. We read into other people motivations that may not be there at all. We may find it hard to trust others and systematically distrust everyone we meet.

This can have a direct effect on the well being of the violated individual. There is evidence of a strong connection between being able to trust and our subjective sense of well being. In a 1980 study, J.B. Rotter and his colleagues reported that the high truster is less likely to be unhappy, conflicted or maladjusted: that, regardless of the sex of either the subject or those rating the subject, the high truster was seen as happier, more ethical, more attractive to the opposite sex, and as more desirable as a close friend than the low trust person.¹⁵ In a 1988 article on Type A behavior and its relation to heart disease, R.B. Williams claims that "Hostility and cynical mistrust are now regarded as the lethal elements of Type A behavior by several researchers and driving ambition is no longer viewed as dangerous." In a 1986 study comparing the sense of well being among residents of France and Belgium, R. Inglehart and J.R. Rabier reported that there was "...a remarkable congruence between the levels of interpersonal trust and subject well being observed in given societies."¹⁶

None of this should be particularly surprising. Trust violations emotionally weaken the truster. When someone violates our trust it is natural to feel foolish, angry, or bitter. Even though our trust was justified and had been acknowledged by this other person, we may feel foolish for not recognizing that this person was the kind who would violate our trust. Certainly we had reasons for trusting, but how could we not pick up on the countervailing signals telling us that this was a mistake? In a 1986 article "Interpersonal

Betrayal and Cooperation: Effects on Self-evaluation in Depression" William Haley and Bonnie Strickland showed some clinical support for this.¹⁷ They found that subjects who had been betrayed were more self-critical, less positive about themselves, and applied more negative adjectives than their counterparts in a control group. This was especially so for those people who were already depressed. This group became extremely self-critical as a result of their being betrayed. We may begin to rethink relationships in our past, second guessing ourselves and our abilities. Because of the inherent vulnerability in trust, a violation may strike like a physical blow and provoke a similar sort of anger to that which arises when we are attacked. This can easily cause bitterness and reinforce the more cynical aspects of our personality.

Emotions of this sort tend to dis-empower us in other areas of our life as well. The more foolish we feel the less likely we are to take chances, experience new adventures, and explore our potentialities. While it may be important that we are periodically reminded of our limitations and those of our fellow citizens, outrageous or repeated violations may render us inept or incompetent to meet life's challenges. Excessive anger and bitterness tends to weaken us: often making us less confident and capable. In focusing on the past we may excessively worry about repeating what we see as mistakes. If our judgment is faulty in this arena it may be wrong in other ways as well.

A related problem is that trust violations shake our confidence in the honesty and reliability of people. A violation of trust depends upon the trusted acknowledging that they can be trusted, and making a commitment to us. These kinds of affirmations and assurances are critical for us to be able to predict the future behavior of others and act accordingly. Actions, like trust violations, that weaken our confidence that people are truthful or capable of following through on their commitments can seriously diminish our ability to cope with an increasingly complex world. If we think that assurances are worthless then we have severely limited options in how we can interact with others. The less it can be assumed that someone else can be generally taken at their word, the more difficult it becomes to make plans for the future.

Damage done at a societal level

Beyond just the damage caused to the interpersonal relationship between trusted and truster such violations can have societal repercussions. What we would like to know is how much damage a trust violation

within a relationship does to the fabric of the society in which the relationship is embedded. Unfortunately, the psychological and sociological literature on the societal effects of trust violations is minimal at best.

Presumably we can extrapolate from the studies cited above about the detrimental effect of a loss of trust in interpersonal relationships. The greater the number of violations the greater the cumulative effect on the society at large. A society filled with violators and violated will be a disheartening place to live.

This is borne out to some extent by the several examples in the twentieth century of how oppressive and depressing a society can be where betrayals are actively encouraged by the government. In **The Haunted Land**, Tina Rosenberg documents some of the effects on the populace of the suspicion and mistrust created by totalitarian governments even after those governments have fallen.¹⁸ This is an ongoing problem for such countries as East Germany, Poland, and the former Czechoslovakia. For example, East Germany, one of the most dreary and oppressive of the eastern block nations, had as much as 10 percent of its populace paid by the government to inform on their fellow citizens. When the governments of these countries fell, the files kept by the secret police became public. Which of their colleagues or neighbors had been informers, what they had told, and whom they had betrayed all became accessible to the public. An ongoing theme of the book is the various ways in which the citizens of the country have to cope with the violators: what should be forgiven, what should be punished, and how severe the punishment.

Of course, the effects of trust violations on a society at large are hardly restricted to totalitarian regimes. The cumulative affect of trust violations diminishes the possibility of social cooperation within the political arena. Most American politicians, Republican or Democrat, start their speeches by asserting that there are many challenging, vital problems facing Americans today. Health care, public education, the nation's infra-structure, welfare, social security, and so on, all require creative and arduous action by the nation to prevent collapse in the coming decade. The only way that these solutions can be implemented is through trade offs from one constituency to another. We may need to ask the elderly to accept decreases in Medicare payments so that roads, bridges, highways, trains, and the like can be fixed, replaced or updated. At the same time we may need to ask the most well off to accept increased taxes, so that schools can continue to be funded, and ask for greater financial sacrifices from students. For each member of society to make sacrifices for the common good will require extensive trust. Each violation takes its toll on the common pool of trust, thereby

making such sacrifices unlikely.

Jonathan King makes a similar argument for the need for greater widespread trusting, if we are to become more successful within the economic sphere. He draws from two different studies, one by Tom Peters and the other by Robert Reich, that demonstrate the need to promote and reward trust. Peters points out that managers who create conditions of trust have a more productive environment and that, "...orthodox management's methods of 'enforcing agreement' are obsolescent." King writes

The good news is that these and numerous other examples demonstrate the dramatic successes that result from abandoning traditional "control systems" and institutionalizing conditions of trust in a variety of ways.¹⁹

King then argues that this view is supported by Robert Reich's work. Reich contends that the increasing complexity of the economy makes the promotion and flourishing of trust all the more necessary. Summarizing Reich's first argument, King writes

As a result of our economy's increasing complexity, it is becoming more difficult and expensive to spell out and enforce mutual responsibilities through detailed contracts and administrative hierarchies. Moreover, as time frames become more compressed it is also becoming more expensive to engage in lengthy negotiations and litigation. Conditions of trust are therefore becoming increasingly crucial to competing - and cooperating - in today's business environment. Conversely, pervasive levels of mistrust among managers, managers and workers, firms and customers, and business and government, are fast becoming a luxury.²⁰

The other area of the economy requiring an increase in trust is in the promotion of innovation and entrepreneurial activity. Again, summarizing Reich's work as well as a Boston University study, King writes,

Conditions of trust are especially essential to innovation - and innovation is crucial to a competitive economy. As Reich and others emphasize, it is misleading (perhaps it has always been misleading) to conceive of innovation primarily as the Big Idea arrived at by an Individual Entrepreneur, purchased by Management, and produced by Workers. It is more accurate to conceive of innovation as many little ideas, offered by those working directly with the product and with customers, and implemented by them on the spot...Reich underscores the point implicit in the Boston University Study: "collective entrpreneurialism depends on commercial trust. Collective gridlock ensues when trust breaks down" The more general point is that trust is incredibly efficient and effective. This seems so basic to understanding why excellent firms are excellent, that one is tempted to say as Tom Peters often says, "Why does anyone need to point this out?"²¹

The views of Peters, Reich, and King are further supported by Francis Fukuyama's work **Trust: The Social Virtues and the Creation of Prosperity**. In it Fukuyama makes a sustained argument for the vast advantages

high-trust societies have over low-trust societies in realizing economic, and social goals. Low trust societies generally must rely on state action if they are to create any large economic organizations and usually these state owned companies are less efficient and well managed than their private sector counterparts. Moreover,

The prevalence of trust does not simply facilitate the growth of large scale organizations. If large hierarchies are able to evolve into networks of smaller companies through modern information technology, trust will help in this transition as well. Societies well supplied with social capital will be able to adopt new organizational forms more readily than those with less, as technology and markets change....²²

Fukuyama also contends that the advantages of a high trust society are not simply economic,

There are, moreover, other benefits to a strong propensity for spontaneous sociability, some of them not economic. A high-trust society can organize its workplace on a more flexible and group oriented basis, with more responsibility delegated to lower levels of the organization.. Low trust societies, by contrast, must fence in and isolate their workers with a series of bureaucratic rules. Workers usually find their workplaces more satisfying if they are treated like adults who can be trusted to contribute to their community rather than like small cogs in a large industrial machine designed by someone else.²³

Another societal problem caused by violations of trust is that these contribute to a climate of suspicion and fear. The more violations of trust that take place the less safe we feel. Each violation of our trust is a proof of the lack of good will in the world toward us. Each violation is another piece of evidence that we have good cause to fear the people around us and be suspicious of both friends and strangers. The more violations that take place the more it becomes normal to suspect that whoever we are interacting with may be out to undercut us in some way, to abuse our trust. Whether or not it is sensible to live in such a manner depends upon one's circumstances, but such a climate of suspicion and fear will obviously affect how we perceive human interaction. When given a choice of motivations we will assume the more self-serving. This suspicion of others causes them to feel threatened and they too become less likely to trust. A feedback loop is created where it becomes harder and harder for us to be able to discern the true motivations of another.

In a short story from his collection *The Secret Pilgrim*, John LeCarre conveys some of what happens to people's perception when they are placed in climates of pervasive suspicion. A young agent, Ned, early in his training is assigned to surreptitiously protect a visiting dignitary's wife. He is shadowing the woman as she browses through a department store and becomes convinced that another person who has been following her is intent on assassinating her. He is about to violently attack his suspect when a more senior agent restrains him.

It turns out that the woman was a kleptomaniac and that the suspect was employed by the woman's husband to quietly reimburse store owners so that there would be no publicity. The senior agent says to Ned as the suspect pays off the floorwalkers,

That's the trouble in our job Ned...Life's looking one way, we're looking the other. I like an honest-to-God enemy myself sometimes, I don't mind admitting. Take a lot of finding though, don't they? Too many nice blokes about.²⁴

Lastly, violations of trust are likely to contribute to the litigious nature of society. Among people of good will and respect it is usually possible to settle disputes amicably. But it is hard to respect those who violate our trust or even believe that they are decent people. If they were why would they neglect or maliciously abuse our trust? The way to resolve a dispute with those we don't trust is to take them to court. There are good reasons, though, for why the courts are supposed to be the place of last resort, only to be appealed to when the other possible means of resolving the dispute have broken down. Whenever the courts are involved an entire machinery is put into place that complicates and antagonizes everyone involved. In our adversarial system the competing sides do their best to win and are not particularly concerned whether people's feelings are damaged. The money involved is often staggering and seldom is the final solution completely satisfactory, even to the winner. The more litigation that takes place the more the courts are backed up and the more time, effort, expense it takes from everyone connected with the system. There is a good reason that a number of people have claimed that large increases in law suits are highly destructive to society.

Developing a framework for exploring ethics and trust

When we consider what we have seen in these first two sections we can reasonably conclude that trust relationships have a substantial moral weight attached to them. In virtue of acknowledging the other party's trust, the trusted party has created a situation in which they have undertaken responsibility for a wide range of damages accrued to both the trusting party and to others if they violate the trust. Moreover, many of these harms are of a sort that could not have happened except in the context of a trust relationship, which thereby increases the level of the trusted party's moral responsibility. There is therefore, a substantial obligation on the part of trusted parties to do what they can to preserve the trust relationship. By focusing on trust relationships and trust violations, we are able to construct a systematic approach to exploring questions of trust and ethics.

First, we must ascertain if something is indeed a trust relationship by seeing if the trust is both acknowledged and justified. How exactly we will decide if these criteria are met will probably be largely determined by the nature of the parties to the relationship and what is being trusted. After we decide whether this is a trust relationship we have a number of options. We can look to see if there are ways in which trust is being violated/betrayed or look to see if there are ways to promote trustworthiness in the trusted party. Depending on whom the trusted party is, the investigation might entail doing these tasks at either an interpersonal or a collective level or both. Because of the vast influence of collectives we might also compare the effectiveness of various collectives in promoting trustworthiness and eliminating trust violations. While this is admittedly only programmatic, such a process does provide us with a way of identifying ethical difficulties (or potential ones) and a guide to responding to these difficulties. In Chapters Five and Six I will conduct a partial demonstration of how such investigations might proceed. However, before I leave this chapter I need to also discuss some of the constraints on such an investigation of trust.

Section III: Limitations and constraints

Preliminary remarks

The nature of trust is that it is a disposition directed toward another about a trust object on the basis of a particular set of beliefs about the trusted party. All this makes it a highly case specific kind of relationship. What this means is that all trust relationships and all violations of trust are not morally equivalent. Therefore, any ethical evaluation of a trust relationship must, in addition to the elements discussed in Sections I and II, take account of the following three features of a particular violation: the character of those involved, the circumstances, and the motivations of the individuals. By considering all these features we can make a distinction between those trust violations that we believe are morally permissible or praiseworthy and those that are wrong. Moreover, a consideration of all these features will help us judge the degree of the immorality. Was this an egregious violation? Once we know the whole story, will we say it was understandable even though we may still label it immoral? Should we forgive the betrayer? This inherent complexity acts as a constraint in any evaluation of a trust violation.

A second constraint is that it is unlikely that there will be a single standard or test that can be applied to differentiate immoral trust relationships, which may well deserve to be violated, from those that are not. I will consider Annette Baier's test for what constitutes a morally decent trust relationship and explain where I believe it fails. While these two features do act as constraints on what we can reasonably hope to be accomplish in an ethical investigation of trust, they also prevent us from extending our reach too far.

Johnson, Shklar, and the use of narrative

Both Shklar's "The Ambiguities of Betrayal" and Johnson's **Frames Of Deceit** rely heavily on detailed examples from literature, especially novels, theater and short stories, as keys to understanding trust and betrayal. Each of them uses works by Shakespeare, Sophocles, Flaubert, Marlowe, and Conrad among others to explore the complexities of trust and betrayals. Although they make frequent use of historical examples, it is illuminating for our present purposes to see why each relies so heavily on literature. In his introduction, Johnson (who could well be writing for Shklar as well) explains why literature is so useful for exploring trust,

The more I thought about this...the more I became convinced that a theory which construes individuals simply as units of uniform psychology, abstracted from ideas of moral character and from the circumstances of their lives, is not going to be sufficiently refined. By contrast, seeing the giving or withholding of trust as a feature of **narrative** in my view enables us to grasp its intelligibility and at the same time focus on those actual gaps and interstices in conduct which often create the risks of trust and go to the very heart of its moral point. Literature, of course, fulfills this narrative requirement very well-- my hope is that my treatment of these literary examples furthers the philosophical discussion too.²⁵

Great novels, stories and plays are not vague or nebulous. They are works in which small details matter to understanding the piece as a whole, in which the history of the characters helps frame our assessments of what they do in the course of the plot, and in which the social and cultural milieu matter a great deal to understanding what happens throughout the course of the work. It is for these reasons that Shklar and Johnson find narrative literature so helpful in understanding trust.

None of this is surprising when we remember how highly specific trust relationships and violations of trust are. For trust violations and betrayals there are definite conditions that must be met before we can classify an action as a genuine violation. This means that an adequate understanding of betrayal requires

knowing the history of the people involved, what led them to enter into the relationship, the particularities of the betrayal or violation, and so on. The three considerations that Johnson and Shklar repeatedly highlight in their literary examples are: the character of the individuals, the overall circumstances surrounding the violation, and the character's reasons or motivations.²⁶ Obviously, these three aspects are not isolated or unconnected from each other: indeed they are highly intertwined. However, for clarity's sake I will consider them separately.

Character

One reason that the character of a betrayer matters to us is because, as Judith Shklar says, "...although all of us occasionally violate trust, we are not all of us treacherous characters."²⁷ She wants us to be sensitive to the differences between a "pure" traitor and more ambiguous examples. The former is the kind of person who would

...betray in order to exercise power over those whom he can hurt by violating their trust. The despotic parent who promises a child a gift or an outing, only to withdraw it at the last moment; the experienced seducer who enchants teenagers mainly in order to leave them quickly...They and those whom we call 'dishonorable' because they have no inhibitions about pursuing their ends are relatively uncomplicated betrayers.²⁸

"Ambiguous" traitors, on the other hand, are people whose admirable character traits are significant contributors to the ethical dilemma in which they find themselves. Shklar cites the protagonist of Joseph Conrad's **The Secret Sharer** or Shakespeare's Coriolanus (a favorite of Johnson's as well) as examples of this category of traitor.²⁹ As Shklar puts it,

There are also characters who would have to betray themselves if they did not betray others, like the hero of Conrad's story **The Secret Sharer**. Shakespeare's Coriolanus, who deserts his people, the Romans, because they demand a democratic demeanor from him, claims that he had to be untrue either to their own character or to them. These men each betrayed a public trust, but they were not perfidious characters at all, which is what makes them ambiguous, though their acts are really quite simple betrayals.³⁰

By seeing Shklar's distinction between pure and ambiguous traitors we are in a better position to evaluate the consequences of their violations, as well as what actions we may want to take in the future. The parent in Shklar's example who maliciously betrays the child should make us concerned, not because the loss of a toy is

such a great tragedy, but because of the indications this gives us about the kinds of frightening behavior this person is capable of.

Moreover, it is not just the character of those who violate trust that matters. We must also take into account the character of those who have been betrayed. Shklar uses Charles Bovary as an example of how the character of the betrayed will also affect our judgment of the ethical status of the betrayal,

Charles Bovary is not an innocent; he is simply so passive and deliberately blind that he will not see that his wife has lovers. He is no stranger to deceit, however, for when he was a student he spent his parents' money on pleasures, while he made them believe that he was studying medicine. Eventually he settles down, but he betrays his patients...³¹

It is because Charles Bovary is such a man that the reader can sympathize with Emma and not view her as merely a cold, calculating cheat.

In some cases the character of the betrayer may be so admirable and that of the betrayed may be so repugnant, that the betrayal strikes us as both a courageous act and a just punishment. For example, toward the end of World War II a group of high ranking German officers tried to kill Adolf Hitler. They were led by Count von Stauffenberg, who was thoughtful, decent, brave, and loyal, having been decorated several times. Because of his honorable character traits and because of the low regard we hold for his intended victim, our respect and sympathies in this action of betrayal are directed entirely toward von Stauffenberg and his fellow traitors.

The character of the individuals involved therefore matters a great deal both in determining the extent of the damage, the appropriateness of the act, and the extent to which we might excuse the action. However, there are other ways in which character may play into a proper understanding of trust violations. For Johnson the role of character in understanding betrayal is especially important when the person involved is a political figure. A central concern of Johnson's book is to bring out the complex ways in which trust, political imperatives and moral character intertwine. He points to Sophocles's play *Philoctetes* as an instructive example of how consequences alone will be inadequate for understanding the possibility of trust and betrayal. The title character was unjustly stranded on an island by his fellow Greeks. Some years later, while in the midst of the Trojan war, they have learned from a prophecy that they cannot win the war without Philoctetes's bow in their possession. They therefore send Odysseus to steal it. The problem for Odysseus is that because of

his personal reputation as a deceiver and his high standing in the Greek councils, Philoctetes will be suspicious of him and is quite likely to kill him on sight. Moreover, the bow makes Philoctetes invincible. This means that Odysseus by himself will not be able to use force or trickery to take the bow away from Philoctetes. He therefore convinces a young highly honorable man, Neoptolemus, to aid him in his quest. Neoptolemus, whom Odysseus accurately recognizes as trust-inspiring, is supposed to befriend the hapless Philoctetes and then steal the bow. However, the scheme goes awry precisely because Neoptolemus is an honorable man. Stealing the only weapon of a sick and wounded man who has suffered so much and so unjustly, is not something he can do and retain his sense of identity. Neoptolemus is the only one who has the sorts of qualities capable of inspiring trust in the suspicious Philoctetes, but since these qualities arise from central aspects of his character they cannot be shunted aside for purely consequentialist reasons. Johnson uses this and a number of other literary examples to make his claim that the possibility of trust (and betrayal), either in the public or private sphere, is only comprehensible if character is given a prominent role in the analysis.

What is at issue is not the neutral calculation of means for the achievement of ends, but the standpoint of moral character against which morally difficult choices are made. Political morality is not to be understood as a kind of moral accountancy. The utilitarian assessment of an outcome as the lesser evil may soon see it as not evil at all, and the claim that wrongdoing is done only when it is necessary can quickly translate into the probability that it will be done when it is not...What matters is how officeholders take decisions and how they respond morally.³²

However, calling attention to the crucial role character plays in understanding trust violations also shows us some of the limits of trust as a tool for ethical reflection. If certain character traits make a trust violation more forgivable it would be helpful to know what they are. But when we look for this we find that what constitutes the set of character traits separating out those people who are praiseworthy from those who are is not universally agreed upon. We can see one example of this controversy in the historical debates among virtue theorists as to what comprise the core virtues. In different eras different character traits have been highly prized as important virtues to aspire to only to be later downgraded in favor of a new set. Plato believed fortitude, temperance, justice and wisdom to be the cardinal virtues. This set is supplanted later on by Aquinas's claim that faith, hope and charity are the highest virtues. This in turn is replaced by more modern articulations by writers such as Edward Pincoffs, Martha Nussbaum, and Alasdair MacIntyre.³³ While there is significant overlap on a number of virtues, there are also several major differences. Unfortunately, what we

have learned about trust thus far does not settle the question for us.

Circumstances

Since there is always a context for the reasons why we may trust others or why they may feel compelled to betray us, the circumstances of the betrayal will matter to us as well. As Johnson writes,

Individual human attachments, however, cannot be brought to life from a static and empty beginning. They are rooted in inherited circumstance...Trust originates not from a neutral starting point, devoid of social attribute and ethical meaning, but from concrete historical circumstances...³⁴

Throughout their work Johnson and Shklar include a number of factors as the salient aspects of a person's circumstances: familial connections, the historical period, the social roles the characters are embedded in, the upbringing they have had. Circumstances are important because they shed light on the first element we discussed, the character of the individuals involved. We would be less sympathetic to the plight of Madame Bovary today, when there are far more options available to her than simply remaining faithful in a loveless marriage, trying to find some love through her affairs, or remaining single. It is because of the severe restrictions on the available options to a woman of her day seeking both love and economic stability that her plight strikes us a genuine dilemma.

Sometimes the society in which the betrayal takes place makes it unclear how we should morally assess the betrayers or the betrayed. Shklar cites Louis Auchincloss's novel, **The Embezzler** and Frank Norris's novel, **The Pit** as examples of how the rules and mores of a particular society may make it hard to know what to say of a betrayal, even when the consequences are devastating:

The honor codes of college do not apply to the Stock Exchange, an upright banker tells a New Deal reformer in Louis Auchincloss's novel **The Embezzler**. The actual felon explains that he cannot see why one should play the Roman patriot, and thinks his friends should pay his debts even though these were incurred when he sold securities that had been put in his safekeeping by his club and his relatives...In Frank Norris's **The Pit** the organizer of a clique that wants to prevent the hero from cornering the wheat market sells out without telling his fellow speculators, as soon as he sees that they cannot succeed. The rest are ruined, but he is undisturbed, because he figures that this is how one must behave in the each-man-for-himself world of the Chicago Wheat Exchange. In both cases we feel that the reluctance of the betrayers to feel the slightest guilt is not wholly self-deceiving. They do live in that kind of world. The embezzler may be unrealistic about the obligations of his fellow brokers to help him out, but they are not much better than

he, when they run into competitors whom they fear and dislike, or the government's agents....The reigning habits and impinging conditions are such as to rub off on each one, and betrayal is muted by the sordidness all around it.³⁵

Knowledge of the surrounding circumstances of the betrayal is also crucial to us because it brings into sharper focus the value of the trust object. The film **Casablanca** is at one level simply a story about a love triangle, and yet it is about so much more because it is set against the backdrop of the war against the Nazis. The actual and possible betrayals involved gain in significance precisely because of this fact. In the film Rick (Humphrey Bogart's character) double crosses Captain Renault (Claude Raine's character) and Ilsa (Ingrid Bergman's character) by making sure that both Ilsa and Victor (Paul Henreid's character) escape to America. The fate of the lives of hundreds of underground fighters turn on Rick's decisions. It is only in light of this fact that we can properly appreciate Rick's choice to betray Renault and not Ilsa. Suppose it was 1995 and Victor was vice president at an advertising firm and Ilsa his wife. It would not at all be clear that we would applaud Rick when he encourages Ilsa to go back to her husband with the lines, "...you're part of his work, you're part of the thing that keeps him going. If you don't go, you'll regret it. Not now, perhaps. Not tomorrow, but soon and for the rest of your life." By changing the circumstances and keeping the love triangle it ceases being a drama and becomes a comedy.

Once again, while seeing the important role circumstances play in understanding betrayal and trust we can also see the limits of trust as a tool for ethical reflection. What circumstances justify what kinds of betrayals is not a question that can be settled by reference to trust alone. Is the oppression of women in today's society adequate justification for a woman engaging in betrayal whenever she believes it may cause a dent in that oppression? Would such an approach to life be more damaging to the betrayer than the good it could cause? Such questions can only be settled by combining our ideas about betrayal and trust with work from political philosophers and ethical theorists.

Motivations

Lastly, both Shklar and Johnson ask us to consider the motivations of the characters as they decide to betray. Again, like character and circumstance, motivation cannot be considered entirely distinct from the other two elements; they are all three deeply intertwined. However, we can to some extent separate our judgments

of character from the reasons or motivations people may advance in explaining their choice to betray. We may think of characters as noble or decent in one light, but when we consider their reasons or motivations for betrayal we may judge them more harshly. Coriolanus may be admirable for being true to his character, but his anti-democratic, elitist motivations make us rightly nervous. The contrast between Brutus and Cassius in **Julius Caesar** provides us with a study in two characters who take approximately the same action but for different reasons. Cassius acts from jealousy and envy of Caesar's power, while Brutus acts to protect the republic from being turned into a monarchy with Caesar as its absolute ruler.

Furthermore, some of the most powerful moments in drama and literature take place when the characters must make a choice that is not readily resolved by looking to their own past. In such moments they must choose between conflicting prior commitments or striking out on an entirely new course. It is partly for this reason that Thomas Becket has been the central figure in plays by two major writers: T.S. Eliot and Jean Anouilh.³⁶ In Jean Anouilh's play **Becket** the title character has been a rogue and a lackey most of his life. Henry II installs him as the most powerful religious figure in England as a means of furthering his own control over the church with every expectation that Becket will continue to be true to character. However, Becket surprises Henry by becoming a strong advocate for the church, an action Henry sees as a personal and political betrayal. Here we can only judge Becket's betrayal by carefully considering his motivations for this radical character switch. In Eliot's **Murder in the Cathedral** the playwright gives Becket a lengthy monologue in which the saint tries to decide whether to stay and await the assassins he knows are coming or to flee to safety. Having decided to stay he further examines his own motivations for this decision to make sure they are the right ones. Is he staying because it the right thing to defy Henry's plots against the church's authority, or is he staying because he realizes a martyr's death will bring him glory? He muses to himself, "This last temptation is the greatest treason, to do the right deed, but for the wrong reason."

Finally, focusing on motivations is another way of clarifying the value of the trust object involved. When we must evaluate the motivations or reasons a character puts forth for betraying a trust we are forced to balance this against what we believe will be lost because of this betrayal. In the novel **Tinker Tailor Soldier Spy** the main character, George Smiley, unmask his colleague Bill Haydon as the double agent who has

turned the British Secret Service inside out. Throughout his 30 year career Haydon has exposed every agent in the Eastern Bloc, passed on vital information about not just England but all her allies, and sabotaged numerous plots against the Soviets. When Smiley asks him about his motives, Haydon replies that in part his decision was made because of his recognition that England was no longer a significant world power and because he had said everything he had to say as a painter by the time he was sixteen and, "after all, one had to do something with the rest of one's life."³⁷ In the face of such enormous damage this seems hopelessly inadequate as a defense.

Like character and circumstances, seeing the important role motivation plays in evaluating trust violations also shows us the limits of focusing solely on trust. After all, what motivations are morally praiseworthy and which are not is not widely agreed upon. As Shklar writes,

To some, betrayal seems less culpable if it is done to achieve a "high" rather than a "low" object. Sex and money do not, as a rule, justify betrayal; but selfless political or other beliefs often do, which may well be a completely irrational judgement, if one considers consequences at all. It is difficult to see why fanaticism is excusable, but personal ambition is not...³⁸

Certainly, what motives we consider appropriate and which we don't will be better understood when we place them next to the consequences of the violation, the character of the individuals, and the surrounding circumstances. However, a complete analysis will have to take into account at the very least our ideas about equality, justice, utility, and rights.

These additional ethical considerations presented by Johnson and Shklar complicate any systematic approach to the ethics of trust. The complexity of trust relationships and violations does not allow for categorically declaring that trusted parties must always do what they can to maintain trustworthiness or that all trust violations are wrong. Things might be different if there were a test that could distinguish moral trust relationships (which presumably should not be violated) from immoral ones (which can be violated). I will conclude this chapter by examining the possibility of a test that would establish such a distinction.

Baier's expressibility test

Thus far, I have explained what a trust violation is and what I take to be the morally relevant considerations in determining the ethical status of such violations. We may now ask, is there some standard or

test that we could use to apply to any given trust violations that would tell us when they are appropriate or praiseworthy and when they are morally objectionable? While both Johnson and Shklar believe that trust violations can range from the heinous to highly courageous and praiseworthy, neither proposes a test or a method that would systematically allow us to discriminate among them. For example, Shklar continues the quotation above by saying, "In any case, motives and purposes count for much," which may be true but is not particularly helpful. I suspect that she would feel such a test would gloss over the important distinctions, complexities, and variables she has been at such pains to bring to light. Johnson explicitly argues that any universal standard or test will not fare very well. In his concluding chapters he is primarily concerned with the question of forgiveness and its relationship to the public sphere. While there has not been a great deal written about this topic, there is one such test in the literature, Annette Baier's "expressibility test." Although the test as it stands is not viable, Baier's approach is highly suggestive and I believe its failure is instructive.

Baier agrees with Shklar and Johnson that it is important to see the enormous complexities and ambiguities surrounding the issues of trust and betrayal. She also agrees that on some occasions betrayal is not only permissible, but it should be encouraged. In an extremely interesting passage from "Trust and Anti-trust" she writes,

...what is a trust-tied community without justice but a group of mutual blackmailers and exploiters? When the trust relationship itself is corrupt and perpetuates brutality, tyranny, or injustice, trusting may be silly self-exposure, and disappointing and betraying trust including self-encouraged trust may not be merely morally permissible but morally praiseworthy..I now turn to the question of when a given form of trust is morally decent, so properly preserved by trustfulness and trustworthiness, and when it fails in moral decency.³⁹

It should be noted that Baier's concern in the section is not with trust violations per se, but with the conditions she believes are necessary to call something a case of a moral trust relationship. However, this is the closest thing in the literature to a test and so we will see if it is adequate for determining the ethical status of any given trust violations. Although Baier never defines what is meant by a trust relationship, I interpret her as referring to those relationships where all three conditions necessary for calling something a trust violation are present: the trust is justified, acknowledged, and, if a disappointment occurs, it is due to either neglect, indifference or an intentional decision on the part of the trusted.

The key to deciding if a trust violation is immoral or morally acceptable lies in determining what is

meant by a morally decent (or indecent) trust relationship. What is it about some relationships that would make trust violations morally permissible? Baier's own method, what she calls the "expressibility test", for when trust is morally decent is as follows:

The moral test of such trust relationships which I have proposed is that they be able to survive awareness by each party to the relationship of what the other relies on in the first to ensure their continued trustworthiness or trustiness.⁴⁰

The example Baier uses in her discussion is between a husband and wife.

She asks us consider a situation where an oppressive, chauvinistic husband is trusting his wife to raise their children to adopt his world-view, confident that she will do so because he believes she is too stupid to know what the ramifications of such a world view are. Baier claims that the wife would be disgusted to learn that her husband's trust in her is based in large part on this negative opinion of her. She would come to realize that she is being used by him to promote his own ends, without due consideration to her feelings and thoughts on the matter. It is because he knows she would find this objectionable that he must be secretive about his true feelings. The fact that the relationship would not survive the public exposure of a crucial component of his trusting signals to Baier that this is a morally indecent relationship. While this does not entirely settle the matter, it does give us good grounds for asserting that were she to betray her husband by secretly undermining his patriarchal world view with the children it would be a morally acceptable trust violation.

Unfortunately, while what Baier has said is suggestive, her expressibility test will not suffice as a means of testing whether any given trust violation is immoral. Relationships can perpetuate brutality and tyranny without either member of the immediate relationship being manipulated or tricked or being treated unjustly. In his sociological work on the internal workings of the Mafia, Diego Gambetta shows that even while the mafia may promote distrust in the rest of the community, within the particular "families" trust often plays a crucial role in perpetuating the smooth running of their criminal organizations.⁴¹ The same probably holds for members of the Ku Klux Klan or the Aryan Nation or any number of other morally objectionable groups that perpetuate injustice and brutality. There is nothing in the definition of trust that makes straightforward, non-deceptive trusting the exclusive province of decent people. Nor is it the case that the things people trust each other with are always benign. Because of this, Baier's expressibility test, by itself, is neither necessary nor sufficient for determining the ethical status of trust violations. There are a number of

cases where betrayal would seem morally acceptable, even though it could not pass her test.

For instance, imagine an F.B.I. agent who is going undercover in order to infiltrate a vicious criminal outfit. In order to successfully place the agent inside the organization, the F.B.I. cuts a deal with a member of the organization who will vouch for the agent. The agent cultivates the trust of the criminals and is thereby able to gather enough evidence to convict the lot of them. Like the husband, the agent is relying on secret views about the criminals who, like the wife, would want to dissolve the relationship if they knew his true opinions. The agent's confidence that the criminals will help him by revealing secrets about the organization, tipping him off to crimes and so on, is based on his knowledge that he has been falsely vouched for. Of course, if the criminals were to find this out, the relationship would certainly collapse. Under Baier's test this makes the relationship morally indecent and so if the criminals were to find out about the deception it would be morally acceptable to betray the agent (e.g., by luring him to his death). However, it seems strange to say that it is morally unacceptable for the F.B.I. agent to use deception to betray the trust of a vicious gang of criminals, yet it is morally acceptable for the criminals to betray the agent.

The inadequacy of Baier's test certainly does not establish that some future version will suffer from a similar failure. This particular test is not viable because it focuses too exclusively upon the individuals' motivations and in particular, only those motivations that are directed toward the other immediate party to the relationship. In doing so it ignores the other salient features for evaluating trust violations: consequences, character, and circumstances. The same problem occurs when we focus too acutely on consequences or the character of the individuals. Nonetheless, this seems to indicate that any future test will be faced with a dilemma. A central virtue of Baier's method was that we could make some sense of how to apply it. It took account of an important aspect of trust and yet was simple enough to be comprehensible. Yet, once we incorporate these features it becomes implausible that a universal standard or test modeled along Baier's is possible. Even single instances of trust and betrayal cannot be considered in isolation. They are always embedded in a web of other relationships that are themselves marked by a particular set of historical, economic, scientific, religious features. Baier herself alludes to this problem and says that at best her test can be applied only in a piecemeal fashion.⁴² Perhaps it might be possible to construct a test for trust violations if we fully understood the place of it within the whole network of trust and distrust all through society. However,

as John Donne writes in a review of Baier's work,

A test for the whole network of trust across time as across space, would need to go immeasurably beyond the unalarming conclusion that appropriate trust can scarcely depend upon threat or fraud. It would require an understanding of politics and economics, as much as of individual psychology. No one at present alive has the slightest idea of how to apply any such test.⁴³

Moreover, as we saw from our discussion of Johnson and Shklar, an adequate understanding of how we interpret these features will in turn require that we refer back to larger, more general philosophical theories for help. What constitutes appropriate or inappropriate motivations for betrayers will be influenced by our political and moral views and philosophy. Deciding whether a particular character is admirable or despicable will often turn upon our view of what particular blend of virtues and vices constitutes being a good or bad character. Therefore, a universal standard would have to be able simultaneously to take account of a variety of issues in philosophy of religion, economics, science, ethics and politics. This is not to say that evaluating trust violations is invariably impossibly complicated or only possible in theory. The betrayal of a child's trust by a sadistic, sexually abusive parent would not be difficult to categorize as wrong. However, the more complicated the situation, the less clear will be our response. In any case all this should at least make us pause before engaging in a search for more sophisticated and ingenious bivalent tests.

Concluding remarks to Chapter Four

There is obviously a great deal that needs to be done to investigate the moral dimensions of trust. What I have tried to do in this chapter is construct a method that will allow us to explore some of these dimensions systematically. Our first task will be to identify whether something is, in fact, a trust relationship. Not all relationships, by any means, meet the necessary conditions. We might find that there are relationships where there is an acknowledgment of trust, and yet upon closer examination of the relationship we find that trust is not justified in such relationships. When we do find relationships where trust is justified and acknowledged, we can see what can be done so as to avoid violating trust, as well as what can be done by others to promote trust.

This still leaves us a large amount of latitude as to where to turn in our investigation. For the final two chapters I have chosen to consider trust relationships within medicine and education. Within each, I will

narrow the scope even further since the investigation of trust relationships within either field is a subject worthy of an entire book.

ENDNOTES

1. Judith Shklar, **Ordinary Vices** (Cambridge, Mass.: Belknap Press of Harvard University Press, 1984), p.138.
2. Cf. Carl Hedman, "How Justified Distrust Can Be Put to Regressive Uses," Unpublished. I wish to thank Martin Benjamin for bringing this paper to my attention.
3. This seems to be part of the argument that Jay Katz is making about physician/patient relationships in his book **The Silent World of Doctor Patient** (New York: The Free Press, 1984).
4. Cf. Annette Baier, "What do Women Want in a Moral Theory?," in **Moral Prejudices: Essays on Ethics** (Cambridge, Mass.: Harvard University Press, 1994), p. 1-18; and Trudy Govier, "Trust, Distrust, and Feminism," *Hypatia*, 7, (Winter 1992): 16-33.
5. Judith Shklar, **Ordinary Vices**, p. 147.
6. *Ibid.*, p. 141.
7. *Ibid.* p. 141.
8. For example, Shklar lists as "betrayals" the experience of seeing the social mores, and traditions we grow up with become outdated resulting in a feeling of betrayal or marriages where one partner outgrows the other and the relationship is no longer what it was originally. Shklar is interested in exploring our mixed feelings about such familiar experiences, but categorizing these sorts of situations with examples like Von Stauffenberg and Madame Bovary makes it difficult to know whether our intuitions match hers in assessing their moral status.
9. Annette Baier, **Moral Prejudices**, p.111.
10. I am referring here by the term "lover" to two people who are in love with each other and not as the term is sometimes used to mean people who are basically just sex partners with no other aspect to their relationship.
11. For a helpful discussion of the history of this incident see, **Infant Feeding: Anatomy of a Controversy 1973-1984** ed. John Dobbing (Heidelberg: Springer-Verlag, 1988).
12. Annette Baier, **Moral Prejudice**, p.132.
13. Cf., Erik Erickson, **Childhood and Society** (New York: Norton Press, 1950), and **Identity, youth, and crisis** (New York: Norton Press, 1969).
14. Josephine Hart, **Damage** (New York: Ivy Books, 1991).
15. J.B. Rotter, "Interpersonal Trust, Trustworthiness, and Gullibility," **American Psychologist** 35 (1980): p.1-7.
16. R.B. Williams, "The Trusting Heart," **Psychology Today**, (Jan/Feb, 1989): 36-42; and R. Inglehart and J.R. Rabier, "Aspirations Adapt to Situations--But Why are the Belgians So Much Happier Than the French? A Cross Cultural Analysis of the Subjective Quality of Life," in **Research on the Quality of Life** ed. F.M. Andrews (Ann Arbor MI: University of Michigan, Institute for Social Research, 1986): 1-56. Both cited in Alex C. Michalos's "The Impact of Trust on Business, international Security and the Quality of Life," in **Journal of Business Ethics** 19 (1990): 619-638.

17. William Haley and Bonnie Strickland, "Interpersonal Trust, Betrayal and Cooperation," **Journal of Personality and Social Psychology** 50 (Feb, 1986): 386-391.

18. Tina Rosenberg, **The Haunted Land: Facing Europe's Ghosts After Communism**, (New York: Random House, 1995).

19. Thomas J. Peters and Robert Waterman, **In Search of Excellence: Lessons from America's Best-Run Companies** (N.Y.: Harper and Row, 1982); Robert Reich, **Tales of a New America** (New York: Random House, 1987); as cited in Jonathan King, "Prisoner's Paradoxes," **Journal of Business Ethics**, 7 (1988): 475-487.

20. Robert Reich, **Tales of a New America** (New York: Random House, 1987) as cited in Jonathon King, p. 480.

21. Robert Reich, **Tales of a New America** as cited in Jonathon King, p.480.

22. Francis Fukuyama, **Trust: The Social Virtues and the Creation of Prosperity** (New York: The Free Press, 1995), p. 31.

23. **Ibid.**, p.32.

24. John LeCarre, **Secret Pilgrim** (New York: Knopf, 1991), p.35.

25. Peter Johnson, **Frames Of Deceit: A Study of the loss and recovery of public and private trust** (New York: Cambridge University Press, 1993), p.2.

26. Character is an ambiguous term. It can be used to as a compliment, to say of someone that they have a strong personality or integrity or are just a generally interesting sort of person. Or it can be used in a more neutral sense in which we are simply speaking of the sum total of their dispositions, personality traits, tendencies, weaknesses, strengths, virtues and vices. I will be using the term in this latter sense in the discussion that follows.26.

27. Judith Shklar, **Ordinary Vices**, p.142.

28. **Ibid.**, p.143.

29. In the **Secret Sharer** the young captain of a ship shelters a murder who, he recognizes might easily have been himself. The murderer had killed a disobedient crew member on another ship who had been endangering its safety during a storm. To let that man escape safely and, more significantly, to prove his own courage, fidelity, and self reliance, he endangers the ship and his crew. He is lucky and everyone emerges safely from the ordeal.

In Shakespeare's **Coriolanus** the title character saves Rome from an invading army but refuses to adopt a public stance of endorsing republican rule. He does not believe in equality for all and refuses to say that he does. The public and the Senate abuse and threaten him so he joins the opposing army. It is only when his mother pleads with him for herself and the city that he withdraws his attack on the city. Because of this he is killed.

30. **Ibid.**, p.143.

31. **Ibid.** p.145.

32. Peter Johnson, **Frames Of Deceit**, p.68.

33. Edward Pincoffs, **Quandaries and Virtues: Against Reductivism in Ethics** (Lawrence, Kansas: Kansas State University Press, 1986); and Martha Nussbaum, **Love's Knowledge** (Oxford: Oxford University Press, 1990); and Alasdair MacIntyre, **After Virtue** (Notre Dame, IN: University of Notre Dame Press, 1984).
34. Peter Johnson, **Frames of Deceit**, p.69.
35. Judith Shklar, **Ordinary Vices**, p. 147.
36. Jean Anouilh, **Becket; or The Honor of God** (N.Y.: Coward-McCann, 1960) translation by Lucienne Hill; and T.S. Eliot, **Murder in the Cathedral** (London, Faber and Faber, 1935).
37. John LeCarre, **Tinker Tailor, Soldier, Spy** (New York: Bantam Books, 1974).
38. Judith Shklar, **Ordinary Vices**, p.141.
39. Annette Baier, **Moral Prejudices**, p.120.
40. **Ibid.** p.128.
41. Diego Gambetta, "Mafia: The Price of Distrust," **Trust: Making and Breaking Cooperative Relations**, ed. Diego Gambetta (New York: Basil Blackwell, 1988), p.175-185.
42. Baier herself alludes to this problem with her test when she writes, "One difficulty is that it (the expressibility test) ignores the network of trust, and treats only two-party trust relationships. This is unrealistic, since any person's attitude to another in a given trust relationship is constrained by all the other trust and distrust relationships in which she is involved." (**Moral Prejudices**, p.126).
43. John Donne, Book Review, **The Journal of Philosophy** Vol. XCII (Jan 1995): p.46.

CHAPTER FIVE

TRUST IN MEDICINE

Introduction

In Chapter One I presented reasons why a thorough examination of trust is important and I suggested why it has been neglected. In Chapter Two I explicated the salient features of trust and indicated how to distinguish it from related phenomena such as dependence and reliance. In Chapter Three I looked at the possibility of applying the concept of trust to collectives. In Chapter Four I argued that through a careful exploration of trust relationships and trust violations we could develop a process for investigating some of the moral dimensions of trust.

I concluded Chapter Four by outlining the general framework for such a process. After specifying a domain (e.g., medicine, business, education, government) we select an important relationship within that domain and determine whether it is a trust relationship. If it indeed turns out to be a trust relationship, we can investigate whether trust is being violated and, if it is, evaluate the ethical status of the violation. Alternatively, we can focus on ways to promote trust within the relationship. Of course, these are complementary, not mutually exclusive, activities. By learning why a violation has taken place we may be better positioned to learn how to become more trustworthy and thereby avoid committing unjustified violations in the future. By careful attention to what it takes to be trustworthy we are less likely to commit unjustified violations. It will often be the case that this process can be carried out at either an interpersonal or a collective level or some combination of both.

In the next two chapters I will conduct a partial demonstration of this process by considering trust relationships within the fields of medicine and education. I have chosen these fields because they are highly important areas of our society and because each presents an interesting mixture of questions about trust at both the interpersonal and collective levels. In this chapter I use the physician/patient relationship as my focal point and in Chapter Six I concentrate on the college professor/student relationship. I begin each chapter by presenting arguments that purport to establish that trusting physicians (or teachers) is unjustified or unnecessary and then explain why such views are mistaken. In Section II of this chapter I go on to show that

the physician/patient relationship requires trust by presenting five ways in which trust is critical if the relationship is to flourish. Going into greater depth in this manner is not only helpful for our discussion of physician/patient relationships, but much of what I say there will also be applicable to college professor/student relationships. I conclude this chapter by comparing and contrasting two different collectives, hospitals and the profession of medical doctors, in terms of their effectiveness in promoting trust within the physician/patient relationship.

Section I: Robert Veatch's challenge to trust in physician/patient relationships

Physician acknowledgment of trust

Clearly one of the most crucial relationships within the health care industry is that between physician and patient. Although we have seen a dramatic increase in the numbers of nurse practitioners and physician assistants as health care providers, the physician/patient relationship is still the focal point of most clinical encounters. Moreover, much of the rest of the medical establishment is specifically structured to facilitate and support the relationship between physician and patient. Admittedly, there have been challenges to this view, and there are good reasons to suspect that it must change as medical knowledge becomes progressively more complex. Nonetheless, whether the structure of the health care industry remains largely as it is or undergoes dramatic changes, the relationship between physician and patient is likely to continue to be critical to the practice of medicine.¹ But is the physician/patient relationship a trust relationship? Notice that we are not asking if patients do trust physicians; that would be a question for psychologists, sociologists, epistemologists. What we are looking at here is whether: (a) trust in physicians is justified; and (b) physicians acknowledge that they can be trusted. As the second point can be more easily addressed I will consider it first.

In the case of physicians we are dealing with what I referred to in the last chapter as a "quasi-explicit" acknowledgment as opposed to a highly explicit case of acknowledgment, like a promise from one individual person to another. Whereas physicians may not make an explicit acknowledgment to each individual about what exactly it is they can be trusted with, they can be said to have made certain acknowledgments in virtue of voluntarily becoming a representative of a particular kind of collective, in this case the field of medicine.

Individual practitioners are only able to practice their craft if they are certified by the medical profession; becoming a member of the profession entails an acknowledgment that certain expectations by other people are reasonable. This acknowledgment comes in two forms, roughly corresponding to the competency and good will conditions for trust. With regard to the competency condition physicians have worked hard, ever since the Flexner report, to construct a system that will assure all parties concerned that they possess the greatest technical skill in the healing arts.²

First, American medical schools have to undergo a rigorous accreditation process. Second, all physicians must pass examinations for licensure. Third, physicians undergo residency programs where their skills and abilities are further tested by more advanced practitioners who observe, advise, and pass judgment. Fourth, as they go through their career physicians are supposed to keep current by attending conferences where they can be introduced to new techniques and the latest research. Fifth, in cases of a lawsuit, physicians accept that there is a standard practice for their field, and that if they have not measured up to this with regard to the issue at hand then they are at fault. In doing all this physicians are, in effect, announcing that they can be trusted to perform a wide range of medical tasks competently: diagnose diseases, administer drugs, recommend which specialists to see if required, give prognosis of condition, perform certain surgical procedures. It is a separate, albeit important, question whether these are genuinely effective methods of insuring the competency of the medical skills and knowledge of the individual members. What such practices do tell us is that, as a collective, physicians are proclaiming to the rest of society that they possess a number of skills and talents, and that they can be counted on to employ them competently in the service of those in medical need. Therefore, any given individual member of the profession can be said to have made this acknowledgment when he/she voluntarily accepts the profession's policies about what is expected of its membership in terms of knowledge and skills.

Physicians also acknowledge that they will show good will toward their patients. Although the field does not have as many mechanisms in place to do this, there are at least three ways in which this quasi-explicit acknowledgment of good will takes place. The 1990 statement from the AMA Council on Ethical and Judicial Affairs is intended to be a general statement by the profession of its commitment to care for, respect, and honor their patients.³ Second, the principal organizations for each of the specialties have a code of ethics that dictates

what counts as appropriate ethical treatment for that field. Third, almost all the hospitals have mission statements and ethical codes of their own stating what constitutes appropriate ethical treatment and these institutions expect physicians who utilize the services of the hospital to abide by these codes. While no one of these can, by itself, be said to speak for all physicians, the combination of them can be reasonably said to function as a statement of an ethical commitment by physicians.

Is trust of physicians unjustified?

So physicians do acknowledge that they can be trusted. The second component in determining if something is a trust relationship is whether our trust is justified. Do we have reasonable grounds for our expectations that physicians bear us good will and can competently care for what we entrust to them?⁴ In Chapter Four I argued we could claim trust was unjustified if at least one of two different conditions obtained: (1) we are mistaken about the set of skills and capacities that are required to care adequately for the trust object or (2) our manner of ascertaining if the trusted party has these skill/capacities is irrational or illogical. I also suggested that by flipping these two conditions around we can construct a method for determining if trusting is justified. We may say our trust is justified if we can establish (1) that there is a set of skills or activities that are necessary for the successful or adequate care of a trust object and (2) that we have good grounds for our belief that the trusted party possesses these skills. I will argue in Section II that, with regard to physicians, creating an atmosphere of trust is a critical component to the successful care and flourishing of the trust objects of the relationship. However, before explaining why trust is crucial I will first consider an argument by Robert Veatch in which he asserts the exact opposite; the very nature of the physician/patient relationship makes trusting an unwise and unreasonable policy. Veatch, in an article entitled "Is Trust of Professionals a Coherent Concept?" contends that the traditional interpretations of the physician/patient relationship, views which typically place a high premium on trust, are radically mistaken.⁵

For a number of reasons this is an important article for anyone interested in exploring trust, ethics, and medicine. First, Veatch is making an argument that resonates at least somewhat with the way many people feel about physicians. The increase of malpractice suits and the trend in polls which reflect a decrease in public confidence in physicians give us some indication of a dissatisfaction with the present state of the

medical profession. Veatch tries to capture the source of these sentiments in the very nature of the doctor/patient relationship. Second, the areas of trust on which he focuses, such as informed consent, are important issues in medicine. Third, although I believe Veatch's arguments are wrong at the interpersonal level, what he says is suggestive for why there may be problems with trust, at least at the level of the collective, "physicians." Fourth, while Veatch's arguments gloss over important aspects of trust that I have been trying to bring out in the earlier chapters, the process of showing why his position is wrong will help deepen our understanding of trust even further.

Veatch's claim is that there are a number of features intrinsic to any professional/client relationship that compromise the possibility of trusting professionals, even those professionals with whom we may have an ongoing relationship. If they have some other relationship with us, e.g., if they are a personal friend or relative, there may be reason to trust them, but it is not because of the relationship qua professional. If we do indeed trust them, qua professionals, we are being foolish. His claim is that it is not possible to engage in a trusting relationship with physicians, qua physician, even those with whom we may have a long term interpersonal relationship. As he puts it,

To the extent that it is impossible for professionals (1) to know what the interests of clients are, (2) to present value-free facts and behavior options, and (3) to determine a definitive set of virtues for a particular profession, then I am forced to the conclusion that professionals ought not to be trusted.⁶

He emphasizes that it is not that professionals, such as physicians, shouldn't be trusted because they're bad people. Rather, we can have well meaning caring, non-self serving physicians who ought nevertheless not be trusted because knowing patient's interests, presenting value free facts, and determining virtues intrinsic to the professional role are impossible. This means that if we as patients go to physicians expecting that what we entrust to them will be cared for properly we are being foolish. According to Veatch, physicians are like the four-year-old in Chapter Four who tells his parents that he can watch over his younger brother. While the claim is sincerely meant the four-year-old simply does not possess the requisite skills and talents to undertake this sort of enterprise. To make clear why this is so I will now present each of Veatch's points in greater detail.

Impossibility of knowing a patient's interest

The first problem Veatch sees with assigning a role for trust within physician/patient relationships stems from a difficulty endemic to all professional/client relationships. One of the standard means of differentiating professions (like physicians) from other kinds of occupations is that professionals are supposed to be client centered. Professionals, within the confines of their specialized area of knowledge, are expected to put the client's interests first, to do what will promote the legitimate interests of their clients. Veatch contends that this is impossible for the simple reason that professionals cannot be expected to have the right kind of knowledge about their clients.⁷ In his eyes the interests of the clients have almost nothing to do with the kind of knowledge professionals can be expected to have. His reasons for this are twofold.

First, as clients, we have a wide range of interests. We have political, ethical, familial, cultural, legal, and social concerns. It is the sum total of these various interests that constitute who we are, and it is this totality that we seek to promote or ought to promote, not any single one of them. However, professionals can only be reasonably expected to be familiar with how to maximize a client's interests in a single sphere, in the case of a physicians, the medical concerns. Unfortunately, since medical issues form only a small part of our overall totality of being, there is likely to be substantial and frequent conflict with other areas. Physicians will be ill-equipped to deal with this conflict since their knowledge is necessarily restricted.

Veatch claims that this problem is compounded by a second fact, namely that professionals are bound to be uniquely committed to maximizing the particular interest sphere in which they are an expert. For the cleric it will be the saving of the parishioner's soul, for the lawyer it will be the successful resolution of the client's legal difficulties, and for the physician it will be the restoration of health: the alleviation of a disease, the removal of a tumor, the proper setting and bracing of a broken limb, a reduction in pain, etc. The successful completion of such work is what professionals have extensively studied for, what they have made an enormous (often life-long) commitment to, what provides them with much of their sense of self-esteem and social identity. As professionals they will have a tendency to systematically over-commit their clients to what they believe will maximize their client's interests in this particular sub-field. This will be the case even when we have physician who are dedicated and virtuous. Indeed, such dedication to their profession may drive them to even more extreme behavior than that of their less caring or less motivated colleagues.

Breakdown in the fact/value distinction

Veatch then takes up a second possible role for trust between physicians and patients. Physicians are simply to deliver up the facts of the case in as neutral a manner as possible. Patients would then apply their own values to the process of selecting treatments, constructing timetables for trying out procedures, choosing which specialists to work with, and which hospitals or treatment centers to go to. If this is the proper understanding of physician/patient relationships then the impossibility of knowing a patient's interests would be irrelevant. Since it is not part of their professional role to satisfy all the interests of their patients, it isn't necessary to be able to know what those interests are. What would be necessary for physicians, however, would be that they not thrust their own value systems upon patients. Those physicians who personally believe that we should always hope for the best and plug on to the end should not, for these reasons, be permitted to exclude the option of hospice care from patients with intractable forms of cancers.

Veatch contends that this is not a plausible scenario. Drawing from Dan Brock's essay, "Facts and Values in the Doctor Patient Relationship" Veatch asserts it is unlikely that a doctor can present a patient with value-free facts.⁸ First, there is the practical matter of explaining to patients or their families the diagnosis, prognosis, and treatment options. In doing so physicians may, unintentionally be using value laden language in the presentation. For instance, they may explain to a family member that continuing treatment will only prolong the patient's suffering. Veatch points out that the use of terms like "only prolong" and "suffering" slants the discussion toward a devaluing of further treatment. Second, physicians may convey via their verbal tone and body language what their own preferences would be, thus subtly introducing their values into the presentation. Third, since it is never possible in actual practice to present all the options, a value judgment has to be made about which options are the most important. Fourth, any presentation of treatment alternatives will usually be accompanied by some value laden recommendation of which of these options they believe should be pursued.

Even if these mechanical problems were eliminable, a possibility Veatch deems unlikely, he contends it may be impossible in principle to eliminate physicians' values from the facts of the case. A number of writers, such as Tristram Engelhardt, Peter Sedgwick, and Thomas Szaz, have made the case that there are a myriad of ways in which values intrude on the basic question of how to classify something an illness or

disease.⁹ They have argued that historical settings, social forces and economic factors all significantly intrude on the process of deciding what phenomena are to be classified as a disease. History provides us with a number of examples of such highly dubious "diseases": masturbation, homosexuality, the desire of slaves to run away from their masters. Finally, even if we could construct some value-free theory of disease, there are still problems. By the very nature of their profession, doctors are taught to dis-value diseases and illnesses and value health and normal functioning. It would be an unusual physician who said that diseases and health were both equal in value and that it is merely up to the patient to decide what to opt for. Our present medical education system creates favoring health and against illness.

Impossibility of articulating virtues for the profession

Veatch proposes one last role we might find for trust in the doctor/patient relationship. Patients could trust their physicians if they were able to expect their physicians to manifest a core set of virtues that were inherent to their profession. Perhaps it is the case that physicians cannot know the patient's interests or be able to present the facts of the case in a value-free manner. However, this may not be so serious a problem if there is a set of virtues that patients know all doctors are supposed to share. For instance, "doctors are not to abandon their patients, "doctors are not supposed to misrepresent what they can accomplish," "doctors are supposed to seek input from the patient about what sorts of treatment options would be preferable," and so on. When we consult physicians we could expect that they would do certain things for us, behave in a certain manner, offer certain kinds of treatment, and refuse to do other sorts of treatment.

Veatch claims that it is impossible to construct a set of virtues for the profession of medicine that would cover all its members. The problem as Veatch sees it is that while there are duties and responsibilities that accompany certain societally designated roles, these role-specific duties have to be grounded in more general universal ethical theories. There is no ethic of "the doctor" per se. There are duties stemming from, say, Kantian theory and which, when spelled out in the context of physicians' typical activities, would dictate a certain code of behavior (i.e., respecting the autonomous wishes of rational patients). For those physicians who embrace a utilitarian framework the nature of those specific duties (i.e., help construct and run randomized clinical trials on new pharmaceuticals) would be shaped by the duty to maximize overall

preference satisfaction. Because of this there can be as many role specific duties as there are moral systems. There would be one set for Orthodox Jewish doctors, one for feminist separatist doctors, another for libertarian doctors, another for Muslim doctors. There might be overlap, but the overlap would not be because of their being doctors but rather as a result of commonalities in the ethical theories. Given this, trusting physicians to manifest some set of virtues because they are physicians would not be realistic.

Because there is no reasonable place for trust within physician/patient relationships we should construct systems to protect patients. Veatch himself makes a number of suggestions: the increased use of medical ombudspeople, a greater caution on the part of patients in revealing confidential information, creating more stringent legal safeguards, a general suspicion of the recommendations of physicians, and a systematic lessening of physicians' discretionary powers. While such alterations may be uncomfortable for all concerned, as well as difficult to implement, they would be preferable, on his view, to clinging to the illusion of trusting physicians.

Clarifying Veatch's thesis

There is a great deal that is initially plausible about Veatch's thesis and yet ultimately it is untenable. Before we can see why this is so, though, we need to clarify exactly what it is that Veatch is trying to establish. First, we need to determine whether Veatch is talking about trusting doctors at an interpersonal level or at the collective level or some combination of the two. Phrasing the question in such stark terms may be misleading given that it is practically impossible to make a sharp differentiation between issues of collective and interpersonal trust when speaking of modern medical practice. One hundred years ago there was really quite little a physician could do for us that couldn't just as easily be handled by a wide spectrum of other sorts of healers. Because of this, trust was anchored much more in the dynamics of the interpersonal relationship and not in virtue of any particular collective the healer happened to belong to. Today, on the other hand, there is a great deal of difference between the kinds of knowledge and therapeutic approaches of allopathic medicine when contrasted with that of homeopathy, naturopathy, Christian Science, faith healers, and so on. Which of these collectives a health care provider belongs to matters very much. Therefore, settling the issue on interpersonal trust alone is not a plausible option.

However, a distinction that can be plausibly drawn is between instances where the relationship is solely based upon trust in the collective versus those situations where it is supplemented with an interpersonal relationship. In the former case we are talking about those physician/patient encounters where the two parties are complete strangers to each other before they meet; the physician is primarily seen as a representative of the collective, "medical doctors." Under such circumstances the extent of the patient's beliefs about the physician is based almost entirely upon his/her beliefs about the profession of physicians. By interpersonal trust, I am referring to those cases where we have been to the same physician several times, been treated for ailments, discussed various medical issues, and so on. Given that Veatch does not take this distinction into account explicitly enough, it is not exactly clear how extreme Veatch intends his critique to be.¹⁰ He may be arguing that trust is impossible even in those cases where we have an interpersonal relationship with the physician, and so trust is never possible. Or he may mean that it is possible to trust an individual physician with whom we have an established relationship, but that we cannot do so at the collective level. I will assume that Veatch is making a claim against the possibility of trust even at the interpersonal level, which I take to be the more radical version of the thesis. If Veatch is right, that because of certain intrinsic features of the doctor/patient relationship, trust is impossible for doctors and patients even at the interpersonal level, then it would be hard to see how we could trust doctors at the collective level.

Second, we need to be clear about what it is that Veatch thinks we should be distrustful about. He does not challenge physicians about their competency in diagnosing diseases or in their skill at carrying out various medical interventions. He is not concerning himself with whether we can trust doctors as gatekeepers or with other allocation decisions. He limits himself to three points: physicians cannot be trusted to promote a patient's best interest, to present a value free set of treatment options, or to manifest a set of values constitutive only of being a doctor. From this it would appear that Veatch is talking about three different trust objects. Yet, from what he writes in a more recent piece, "Abandoning Informed Consent," it seems that these are all various ways of stating that physicians are unable to create the conditions necessary for informed consent.¹¹ In this article he lays out abbreviated versions of these same arguments, in an effort to establish his claim that the concept of informed consent is a "transition" idea and that it is time for it to pass away. If we reformulate the points I have just laid out in terms of trust and informed consent Veatch's claim would be something along the

following lines.

Informed consent is impossible because physicians can not have the right kind of knowledge about their patients to be able to "guess what is in the overall best interest of the patient."¹² Furthermore, since it is impossible to inform patients of their options in a value neutral manner and there is no set of ethical norms that we can count on physicians' possessing, qua physicians, we are most likely to be forced into adopting a course of action that would coincide with the physician's values, not necessarily our own. He concludes the article by stating that the best strategy for patients who want to maximize their interests is to seek out institutions that share their value system. In this way when they do consent to the physician's recommendations they are more likely to have an outcome that coincides with their own value system.

I will argue that Veatch's position is untenable for three reasons. First, he significantly misrepresents the possibility of communication in physician/patient encounters; if he is wrong about this, he is wrong about the possibility of trust. Second, his characterization of physician/patient encounters would support a return to a paternalistic approach to practicing medicine. Finally, even accepting his arguments we still have not eliminated the role of trust in the medicine; rather we have simply replaced it at the institutional level.¹³

The possibility of communication

It would seem that Veatch is advocating, to use the terminology of Chapter Two, that patients should rely on physicians but not trust them. However, given his understanding of the doctor/patient relationship, it is not clear that we can even rely on physicians. Reliance would involve being vulnerable to physicians with confident expectations based upon beliefs about their character. Unfortunately, if Veatch is right there could be no confident expectations about encounters with physicians because their character is so distorted by the nature of their profession. After all, according to the argument, physicians are not able to know our interests except in a very narrow way. Even if we try to explain some of our other concerns and how these other considerations might factor into the decisions we must make, we can't expect them to understand us because they will be overvaluing our medical interests. Moreover, how are we to know whether the facts they are giving us are not fatally tainted by the injection of their values or that they aren't keeping something from us? Since there aren't any codes of behavior that we can expect physicians to embody in virtue of being a

physician, knowledge of the character of the physician is almost entirely lacking. If this is so, then we not only cannot trust them, we cannot rely upon them; we can either try to cure ourselves or put ourselves into their hands and hope or pray for the best. I will return to this point in a moment. Fortunately, there are problems with Veatch's characterization of physician/patient relationships so that we do not have to adopt such a depressing perspective.

Perhaps the most serious problem with Veatch's thesis is its denial of the possibility of communication; communication is either self-delusional, manipulative, or irrelevant. If he were correct about this then trust would be unlikely since we would have no real means of conveying to our physician what sort of person we are and what we care about. Yet this is simply not accurate. For example, while it is certainly the case that physicians are going to be more familiar with their patients' medical condition, interests, and concerns, it is hardly accurate to say physicians will have no clue as to what it means to have other interests as well. After all, despite jokes to the contrary, physicians are people too. As such, they too know what it is like to try to blend medical problems, ethical demands, political concerns, legal questions, and familial interests into a cohesive mixture. Suppose that an elderly gentleman tells his physician to wait upon a dangerous surgery until the following week because his first grandchild's birth is imminent, and he would rather take the risk of postponing the surgery than miss the baby's arrival. Most physicians would not reply, "I really have no idea what you are talking about. How can anyone possibly value a baby's birth more than his health needs?" They might disagree, even vehemently, but they could understand that these other trust objects matter to us as well and must be considered.

Veatch is also not clear regarding claims about the untenableness of the fact/value distinction. If taken in a common sense way, the way most of us understand such a claim, then it seems reasonable to say that there are cases where facts and values are separable. As Edmund Pellegrino puts it,

If a child falls out of a tree, fact and value decisions have to be made by parents and physician. Whether or not the skull is fractured, the spleen is ruptured, or shock is present, are all fact questions. Physical examination and X-rays will establish the kind and degree of fracture and provide a basis for what needs to be done mechanically to set it right. The choice of mechanical procedures is based on empirical facts related to risk, effectiveness in healing, restoring function, and the like. Personal values cannot change the physical signs or X-ray images.¹⁴

We obviously will make value laden choices about how seriously we should take a broken leg and what to do

about it; nevertheless, our values have little to do with whether or not we do indeed have a broken leg.

Perhaps Veatch might have meant something stronger than this, for instance, that all scientific claims are influenced to some degree by the prevailing cultural or social norms. However, if taken as a Kuhnian claim about the interplay between science and values it may be true, but so what? Under such an interpretation all scientists, medical or otherwise, are operating relative to a value-laden paradigm. There is no objective standpoint from which to criticize physicians any more than there is to criticize any professional who relies on science.

Besides, both physicians and patients will be operating within the same paradigm. The only real concern most patients would have would be whether the physician were operating out of a radically different paradigm: if, for example, the physician believed that disease is the result of an invasion of evil spirits from another planet. However, physicians who try to apply some radical therapy dictated to them by a highly idiosyncratic value system will be checked by the communities that function to restrain for just such extremist behaviors. The extent to which physicians may imbue their clinical judgments with their value system will be strictly limited by peer review, the legal system, their colleagues, the institutions within which they work, and the patients themselves. Where physicians may be moving out of "normal" science in pursuit of their values, then these groups act to rein them back in.

Furthermore, Veatch oversimplifies the problems associated with the diversity of values. An example like "suffering" as a use of value-laden language would be more impressive if there were sizable debate within the general community about whether or not suffering is a value to be eagerly embraced. The vast majority of people have no problem with physicians seeing the world as a place where suffering is *prima facie* not-a-good-thing and the elimination of it a positive act. How exactly this is to be accomplished and what are the costs (e.g., will the alleviation of the pain cause a decrease in consciousness?) is certainly open to discussion and debate, but not the general negative quality of suffering.

It is important for physicians to be sensitive to the fact that there are a number of groups with a different understanding of the role of 'pain,' 'suffering,' 'life,' and 'death' in the context of medicine.¹⁵ They may see the physician's recommendations as the wrong mix of facts and values. However, these groups are likely to have encountered such resistance long before any contact with physicians. An elderly man who has been a

lifelong Jehovah's Witness isn't shocked at finding that the doctor doesn't accept his world view. He has been through this before. Even in these cases, it is not clear that Veatch's analysis is particularly helpful. While a Calvinist may not view suffering as the worst thing in the world, this is much different from saying that suffering is a "good" to be sought out and induced where ever possible.

Return to paternalism

Let us return to the point I raised a moment ago and consider what sort of relationship we would have with a physician if we accepted Veatch's interpretation. For example, what course of action would we pursue when we have an actual medical problem? If we try to consult other physicians the same problems presumably hold. Talking to a friend does little good since the requisite medical knowledge isn't there. In any case, time constraints may often make such outside consultations impractical. To have to confer with an ombudsperson or patient advocate would only add further layers to an already labyrinthine experience. Also, it is not obvious that having a professional ombudsman within the medical system would even work since as a member of the institution such an advocate would most likely be co-opted by the system. As Edmund Pellegrino points out, the legal mechanisms Veatch suggests would be problematic safeguards since they are the province of lawyers, another group of professionals, who presumably have the same sets of problems interacting with clients that physicians have.¹⁶ Therefore, the possible solutions for rectifying the problems Veatch raises are themselves highly suspect.

These technical questions aside, what is most disconcerting about all this is that it sounds so familiar. Much of it, if couched in slightly different language, would be the same sort of attack promulgated by physicians against informed consent when it was originally being proposed as a remedy to the paternalistic model of physician/patient relationships. Physicians at that time declared that their knowledge was so complex/technical that explaining it to patients was a waste of valuable time and energy. There were specific medical interests that both doctors and patients shared and that needed to be realized. Physicians were supposed to use their superior knowledge to grasp what those medical interests were, and then use their skills to take whatever means (including deception and coercion) were necessary to implement the appropriate therapies. Given this, patient input into physician/patient encounters was of limited value and would probably

only interfere with the successful resolution of the medical problems which brought the patient to the doctor in the first place. This was the motivation for the paternalism advocated by so many physicians and which supported a parental model of trust. Patients were like children and physicians should act like concerned parents; the trust between them should be conceived along those lines. Patients should properly trust physicians to take the actions necessary to help them and do what they can to cooperate.

Veatch has long objected to any characterization of patients as helpless children and physicians as wise parents, so it is not surprising that he rejects such a passive role for patients. Yet, his own argument would seem to lead to much the same conclusion, although by a different route. For example, if the distinction between facts and values is untenable then both the patient and the doctor will have value-laden facts. Since there aren't any real facts of the matter, as patients, we will have to choose between whose set of therapeutic alternatives to implement. Of the two, the doctor's set seems most likely to result in the elimination of the problems which motivated us to seek help in the first place. Therefore, why should a doctor offer a set of alternative therapies for us to select from? The same sort of problem arises when considering patients' interests. Why bother explaining to physicians our other concerns (legal, ethical, political, aesthetic, etc.) when they can't understand these other interests? Such a discussion will be a waste of time and energy for both patients and physicians. Even for those physicians who suffer from the delusion that they do understand these concerns, it will be largely irrelevant because they will inevitably overvalue the medical components. Non-manipulative or non-coercive discussion is, in principle, futile.

But what is left is a situation where the chance for the possibility of an informed autonomous decision by patients is as irrelevant as in the old model. Instead of having doctors who know too much to be able to effectively convey the necessary information to their patients, we now have doctors who are so inherently incapable of understanding patients that it doesn't make sense to engage in a conversation with them. Since people will continue to have medical problems and since there is little to be done practically to ameliorate the situation, patients should be quiet and let physicians do what they think best.

The upshot of all this is that patients are still left in a position where they can trust or not trust the physician and their best strategy is to pick physicians who share their world view as much as possible. Veatch himself suggest a solution along these lines near the end of "Abandoning Informed Consent." He writes

There might be more hope if the patient were to choose her cadre of well-being experts (lawyers, accountants, physicians) on the basis of their deep value systems. That way when unconscious bias and distortion occur, as inevitably they must, they will tip the decision in the direction of the patient's own system...The difficulty in establishing a convergence of deep values cannot be underestimated...But there is reason to hope that people can establish an affinity of deep value orientations, at least for certain types of medical services. For example, certain institutionalized health care delivery systems are now organizing around identifiable value frameworks, recruiting professional and administrative staff on the basis of commitment to that value framework, and then announcing that framework to the public so as to attract only those patients who share the basic value commitment of the institutions.¹⁷

However, notice that while we may not be able to trust physicians with regard to informed consent, Veatch's solution has not really eradicated trust. Now, instead of trusting physicians to do their best to help us make an informed decision, we place our trust in the institution's capacity to provide us with doctors who will make their decisions more like we would want if we could communicate with them. Of course, this understanding of the role of trust in the medical relationship leaves a relatively small role for the patient in the clinical encounter. Although the range of options a physician can implement may be constrained by an institution the physicians are still ultimately making the decisions. The only advantage over the old model is that we have more independence about what kind of paternalistic doctor we will have.

Ultimately, I believe Veatch's criticisms fail. However, I am intrigued by his comments about focusing our trust on health care institutions that clearly articulate an ethical framework. I will explore the possibilities and limitations of his suggestion at greater length in Section III.

Section II: Why physician/patient relationships are trust relationships

When trust is necessary for a relationship

Is a denial of Veatch's negative thesis adequate grounds to say that the physician/patient relationship is a trust relationship? Physicians acknowledge that patients are trusting them, and we have seen that they are not inherently untrustworthy (at least with regard to informed consent). On this basis it would seem fair to say that if we have an established relationship with a physician who has demonstrated that he/she can adequately care for what we have entrusted to him/her, our trust is justified. Can we go further and say that trust of

physicians at the collective level is justified? That is, when we encounter a physician whom we know only as a representative of the collective, physicians, are we also justified in our trust? While having established that trust in physicians is possible, this by itself doesn't seem sufficient to say that trust in physicians, in the collective sense, is justified.

About some aspects of the profession we can reasonably say our expectations are well grounded.

Bernard Barber says the following about physicians as a profession,

With regard to competence, the public's high confidence is warranted; the last fifty to seventy-five years have seen remarkable improvement in the medical profession. As a result of the Flexner reforms and of the resultant universal upgrading of medical school training, the medical profession has been saved from mediocrity and incompetence. The average level of competence of physicians, as a result of their excellent training, is probably higher than the average in any other profession. Furthermore, the enormous advances in medical science and technology have enhance the powerful knowledge and competence of medical doctors. As a result of the combined improvement in knowledge and training for physicians, the public now has very good grounds for having trust in the technically competent performance of all but a minority of physicians.¹⁸

However, assuming Barber is correct, all he establishes is that physicians are well trained, highly skilled, and knowledgeable about health related issues. Nothing that he has said has given us any grounds for our expectations that what we ask physicians to do for us will be conducted in an atmosphere of good will.

Although it is possible to have a trust relationship with an individual physician might it not just as easily be conducted as a reliance relationship? That is to say, the physician/patient encounter could just as easily be conducted in an atmosphere of mutual dislike, hostility, and suspicion. As long as we believed physicians were fearful of legal retribution or greedy enough, we could have confident expectations in the outcome of their attending to our health care needs. If this were so then determining whether we are indeed in a trust relationships with a physician could only be done on a case-by-case basis. In order to say that physician/patient relationships are trust ones (in the collective sense), it would need to be the case that there is something intrinsic to the nature of the relationship to ground our expectations that physicians will have respect and good will toward their patients.

It may help to consider a situation where trust is irrelevant or unnecessary to the relationship, even though it is not inherently impossible. There are a large number of relationships where trust is largely unnecessary or irrelevant to the completion of the goals of the respective parties. In such cases it's not obvious

that we would be justified in expecting the other party to have any good will toward us. For example, take a simple encounter with a sales clerk at a clothing store. If our main goal is to purchase a coat then we can have a successful relationship with the clerk without ever trusting each other at all. If we feel that he/she doesn't care about us and is simply trying to persuade us to buy a more expensive coat, we can disregard any advice about what looks good or bad on us. The clerk could openly dislike us or think our choices are tasteless and tell us so, and it wouldn't matter. It is true we do depend upon the clerk to help us achieve our goals of purchasing a wardrobe. However, our distrust of him/her need not interfere with our trying on other outfits, making a purchase, exchanging an item, or any of the other components of the relationship. Trust might make the whole experience more pleasant, it might improve customer relations, but it is not essential. As long as they do not cheat us or lie to us, we can get what we need from sales clerks and they can get what they need from us. There is a good reason why the watchword of business encounters is *caveat emptor*. I am not saying that all sales clerks should be distrusted, but there is nothing special about the relationship of sales person to customer that turns on trust.¹⁹ If trust in physicians were like this then we could say that while trust may be justified within the context of specific physician/patient encounters (depending upon the particulars of that relationship), it is not justified when all we know of the physician is that he/she is a physician.

However, not all relationships can be conducted this way. Sometimes the successful completion or fulfillment of the goals of the relationship requires that the vulnerable party be able to trust the empowered party. We must have the sense that the other party cares for us or for what is valuable to us, not just for how we can be used to achieve some personal goal. To put it another way, sometimes the absence of trust obstructs the successful fulfillment of the goals and purposes of a relationship. I alluded to this in Chapter Four when I said that there are some relationships (e.g., parenting, friendship, love) where, because trust is essential to their flourishing, there is a deeply implicit acknowledgment of trust. Anyone who voluntarily enters into such a relationship and claims afterward that trust is inconsequential is either disingenuous or so entirely different socially and culturally from us, that we do not refer to the same thing when we use the terms 'friendship' or 'love'. I argued that when we enter into these sorts of relationships we are making an acknowledgment to all concerned that we may be trusted.

I believe that for similar reasons the reverse of this is true as well. When we enter into such

relationships we have reasonable grounds for assuming that the other party can be trusted. If we believe the other party has entered this relationship voluntarily, then we can assume he/she understands as much as we do about what it will take to make the relationship work. If we are both members of a similar cultural and social framework, then it is a reasonable assumption to make that he/she has been socialized with some measure of background information about the nature of certain relationships: what will make them work, what will make them flourish, and what will cause them to fail. Moreover, if one of the members has frequently undertaken these sorts of relationships it is reasonable to expect that he/she will be more intimately acquainted with the normal dynamics of the relationship. If trust is crucial to the flourishing of the relationship and he/she hasn't grasped this point after having been in a number of them, then there is a problem. He/she is either unable to learn from experience or is unwilling to do so. This becomes especially important if the individual is the trusted party since the trusting party is vulnerable to the discretionary power of the trusted.

In the case of the traditional professions (clergy, medicine, law, teaching) we have relationships with both features. These are relationships where trust is extremely important if the goals and purposes are to be fulfilled and where the professional engages in these relationships on a regular basis. Becoming a professional is not an occupation undertaken lightly and, once adopted, the relationships entailed by the profession become a prominent part of the life. I will present five different aspects of the physician/patient relationship that I believe are seriously compromised if the patient distrusts the physician. In some cases there is research to support these claims. While I do not wish to make the claim that all five aspects are present in every profession, we will find that most of them are also present in the teacher/student relationship. Unfortunately, since trust has been neglected by sociologists and psychologists, what I say will often take the form of educated guesses.

Patient's self-disclosure

One area of the physician/patient relationship affected by trust of physicians is self-disclosure by patients, especially of sensitive information. Honest self-disclosure is essential to two of the most crucial components to any physician/patient encounter: diagnosis, and the construction of treatment recommendations. Without a diagnosis of the patient's underlying medical condition the physician cannot make a prognosis.

cannot inform the patient of his/her situation, cannot implement therapies, cannot make referrals, cannot know what series of tests to initiate, and so on. If the diagnosis is inaccurate or false, then the repercussions may be disastrous; yet, an accurate diagnosis depends upon physicians receiving truthful and complete information from patients. If patients withhold information about a sexual or drug history or reveal only what they believe to be necessary for the physician to diagnosis, then the physician will be working partially blind. Patients who hide the amount of pain they are in because they believe physicians will think they are weak or foolish undergo unnecessary suffering. A similar problem can occur with regard to treatment recommendations. People go to physicians in the first place is so that the physician can suggest some course of action (drug therapy, surgery, rest) that will help them; they are uncomfortable or miserable or worried about some physical symptom, and they want to know how to get rid of it. Again, if patients do not fully disclose their history and their present condition physicians will be operating partially blind, and the results can be regrettable.

However, while this information may be important for the successful diagnosis and subsequent treatment of our condition, it also makes us vulnerable in a number of ways to the discretionary power of the physician. Telling a physician about a youthful heroin addiction places a powerful piece of information in his/her hands. Of course, physicians are bound by law to keep such information secret, but this can be slim comfort. There are so many ways that this information could be passed onto others without it ever being tracked back to the physician: a discussion at a party where our name is disguised but just enough information about our situation is revealed so that the listener makes a good guess as to who is being referred to: a case presentation where some of the members of the audience are able to piece together who the patient is: even muttering aloud about the case might be overheard by a co-worker who identifies the patient. What is so worrisome about such situations is that information is not something that can be retrieved once it is let loose. As long as patients retain their secrets, they retain the control over who knows this about them and who doesn't. Once someone else knows about it, this personal control is lost forever.

Because of the need for self-disclosure we are also vulnerable to the opinions and attitudes of the physicians. Being raped, sexually abused, a drug addict, sexually promiscuous, a homosexual, a carrier of a STD, are all important bits of information that patients might disclose about themselves to physicians. Yet, these are also all socially stigmatized conditions, and most of us have been made painfully aware of this at one

point or another. At least one other person beside ourselves is going to know our secrets. Even if we are confident that physicians will not leak the information, they know. If the physician is judgmental or disrespectful or contemptuous because of this information it can be devastating to patients. Because of our awareness of the vulnerabilities entailed by disclosing information about ourselves, being able to trust in the competency and good will of the physician matters a great deal. If we don't trust we are more likely to keep our secrets to ourselves, revealing only that information we feel is absolutely necessary. Even if we feel it is necessary we may not disclose, preferring to take the accompanying risks.

Kevin Corcoran at the University of Idaho conducted a series of experiments that lends support to this claim.²⁰ His study was designed expressly to test the relationship between people's trust in someone and their tendency to reveal potentially embarrassing information about themselves. Not surprisingly, Corcoran found that those who felt they could trust the other party disclosed much more information about themselves than did low trusters and that this was the case for both men and women. Although, Corcoran was focusing on the psychotherapist/client relationship it is probably fair to generalize from this to more conventional physician/patient relationships.

Flexibility in controlling physician discretionary power

The ideal of patient/physician interaction predominant in the medical ethics literature is one in which the final say about what is to be done rests with the patient. Yet, every physician has a certain degree of discretionary latitude when it comes to a wide range of medical tasks. The basic process of conducting a physical examination involves choices about what sort of questions to ask, how slowly or quickly the physical will be conducted, what diagnostic instruments will be used, and so on. Physicians will largely use their own discretion to make such choices. Patients should have input into these matters, but physicians can not substantially alter their personal style for each individual patient. They must have some latitude to conduct a physical or a diagnostic assessment in the manner they have developed over the years.

However, there are also areas in which patients may need to choose how strictly to circumscribe the physician's discretion. For example, if we are unconscious physicians must make treatment decisions about what to do without our immediate input. Unfortunately, we cannot anticipate every contingency. Whether to

start a treatment of antibiotics, put us on a respirator, initiate CPR in case of heart failure, to try experimental therapies, do a CAT scan, are all decisions that in the best of circumstances we would like to be able to talk over with our physician. Yet, what is to be accomplished by any given procedure and the worth of it in terms of losses and gains depends a great deal upon the circumstances of the moment. Going on a respirator may only be a temporary measure with a high likelihood that we can be weaned within a 24-hour period or because of unforeseen complications it may be that we will never come off it. Having CPR done might only prolong a painful dying process by a couple of days, or it might buy us a few more weeks of time to say good bye to loved ones. The results of a biopsy might tell our physicians enough more about our situation that they will want to try a new therapy, or the biopsy may just be one more painful process that merely confirms what everyone already knows about our condition.

Without trust we will try to find other mechanisms to regulate the physician's conduct, such as living wills or durable powers of attorney. Yet, if we can't trust our physician with some discretionary latitude in these circumstances, our options become more limited than we would probably like. The living will and the durable power of attorney are tools best used in consort with a trusting relationship with our physician, not as a replacement for trust. If we are unconscious or delirious we can't revise the instructions we left before we went under. Unfortunately, where we distrust others we do what we can to limit their discretionary power about the things that matter to us. Perhaps our distrust of our physician is based on a belief that he/she doesn't respect our views about the limited usefulness of a life under heavy sedation and a fear that he/she will take any occasion to treat us. Under such circumstances we may try to severely limit his/her discretionary power in order to prevent this abuse. Yet, this may prevent the physician from exploring treatment options that we had not anticipated or from conducting a trial period of a treatment that could be withdrawn at a later date if it proves ineffective.

There is some research that supports the claim that distrust is directly related to limiting physician discretionary power. In a University of Michigan study Lynda Anderson and Robert Dedrick found that the greater a patient's distrust of a physician the more likely they were to try to personally control the encounter.²¹ It is unclear though how much we can make of the results of this study. What constitutes "trying to control" the encounter? Does this mean simply questioning the physician's treatment recommendation? The researchers

felt that too much trust created overly passive patients who were unlikely to participate in the relationship with the physician. Yet, it is unclear from the study what constitutes a "too passive" patient. As I noted above there are areas in which it is impossible to eliminate a physician's discretionary latitude and other areas where limiting it is possible but may cause difficulties for the patient. Not knowing exactly what the patients were trusting to the physician makes deciding who is too passive and who is too controlling highly problematic.

Future encounters with physicians

Each significant interaction we have with someone leaves an imprint upon us and shapes and colors how we will react in the future to similar situations. When we have positive encounters we are not so tentative about engaging in a similar experience. If we have bad encounters we will be more hesitant to undergo it again. This would seem no less true in the case of medicine. Our decision to consult a physician can be dramatically affected by the extent of our trust. If we don't trust physicians we may hold off until the last minute before seeking help. We may not go in for regular check ups even if we have a condition that needs monitoring. We may wait until the condition has deteriorated into an emergency, thereby forcing us to choose between depending upon people whom we don't trust and hoping the emergency will abate on its own.

Unfortunately this can be a highly dangerous attitude for patients. The cure rates for many of the most common and deadly cancers (e.g., breast, prostate, lung) increases with early detection and treatment. Yet, it is impossible to diagnose and treat someone who won't come in. If someone has a condition that requires regular monitoring (e.g., diabetes), missing appointments or ignoring warning signs can be devastating. Waiting until a crisis before seeking medical help means that patients will be treated in the emergency room, a poor place to start a physician/ patient relationship. It might be a different matter if people were too freely inclined to seek out medical treatment, if most of us were hypochondriacs looking for any possible excuse to take up a physician's time. If this were the case then perhaps actively encouraging distrust among patients might prove an effective method of discouraging them from seeking out medical attention except when they truly need it. However, the idea that most patients are hypochondriacs is a myth; most of us are predisposed to avoid going to physicians.

The following is from an article documenting the critical learning experiences of medical students. It

poignantly demonstrates how the dynamics of a medical situation can be dramatically shaped by the patient's history of previous encounters with physicians.

I think we were both surprised by what we saw. Mrs. M was an extremely obese woman who appeared to have spend that last few days sleeping on the street-- she was poorly dressed and extremely malodorous. She greeted us with hostility, telling us how much she hated and distrusted surgeons, and that she was merely seeing us out of courtesy to her internist, whom she very much respected. Dr. R was obviously surprised by her hostility and lacking any patience replied that if she felt this way then there was nothing he could offer. He pointed out that he believed she had an easily resectable tumor, but if it was not treated she might very well die from it. He carefully explained the procedure, its risks, and the possible complications. Mrs. M reacted to his bluntness with considerable anger, reiterating her position that she refused an operation. She then got off the exam table and left the room. Dr. R was clearly frustrated by this interaction and reacted with some less than flattering remarks about Mrs. M's personality. I was also quite upset by this encounter. Here was a woman who had a potentially curable tumor walking away from help. My impression was that she had probably experienced a great deal of pain at the hands of physicians in the past and was not willing to allow them to hurt her again. I felt that Dr. R in letting her leave the room had failed in his job in the most flagrant manner. Had he been more patient, more understanding of her fears, he might have been able at least to win her trust and allow her to being to contemplate the possibility of surgery. I also felt that it was quite clear that Dr. R did not like the patient and he implied that she was the type of person that he did not like on his service.²²

Both trust and distrust are helping shape the nature of the patient's interaction with her surgeon. Because of the trust she has toward the generalist she is willing to meet with the surgeons. However, because of her experiences with surgeons (both previous and present) it is unlikely her condition will be alleviated.

Anderson and Dedrick's study supports the link between trust and medical help seeking behavior. They found a high correlation between trust in the physician and patient satisfaction levels.²³ Moreover these patients were more likely to suggest the same physician to their friends. If we make the not unreasonable assumption that a satisfied patient is more likely to return in the future, then we can make this connection between trust and patients seeking medical help when they need it.

Evaluating treatment recommendations

At some point in a typical medical encounter physicians will present their patients with their findings and on the basis of these findings make some recommendations about what should be done next. What physicians tell us could be almost anything: we are fine, we need to alter our diet, we need to undergo further

testing, we need to start on a drug treatment, we have the beginning stages of a disease, etc. The decision of what to do about all this is left to the patient, which means that how we will evaluate this information is critical. How we will go about our evaluation of both the diagnosis and of the treatment recommendation is dependent upon a number of factors: our familiarity with the medical conditions and treatment modalities discussed, our general knowledge of medicine, our experience with others who have had the condition, and our attitude toward the physician who has been treating us. Unfortunately, most of us do not spend enough time learning about medicine to be able to make our decision purely on the basis of the objective results of the examination. We go to physicians precisely because they possess skills and knowledge that we do not have. While some caution and judiciousness in evaluating the physician's presentation is clearly a good thing, severe distrust may create difficulties for the patient.

One potential problem is similar to what we just discussed in terms of seeking medical treatment. If we are suspicious that whatever physicians say is inaccurate or only serves their own interests we may refrain from acting on it. We may ignore what they have to say completely or downplay any serious warnings they give us as simply an attempt to line their own pockets. When we decide that they were right, it may be too late. This might mean putting off treatments that prevent much suffering or even save our life. Another problem is that we may only hear what we want to hear. If we are pessimistic about our situation we may only take from the discussion what will reinforce our negative perceptions of our condition, or if we are too optimistic we may only pick out the positive points. This can leave us with a skewed understanding of our situation and adversely affect how we act upon that understanding. This may happen anyway, but if the relationship is with someone we trust we are more likely to listen to him/her. Lastly, depending upon how widespread our distrust of physicians we may be led ultimately to a kind of despair at our situation. We will never be able to possess the sum total of their knowledge and experience, even if we were to become physicians ourselves. Physicians cannot treat or diagnose themselves as well as their colleagues. Yet, without trust this leaves us in a difficult position. As Pellegrino writes,

We can consult different authorities about our medical...problems. We may evaluate their logic, the evidence they adduce, or their compatibility with our personal values. Yet when there are differences among experts, we must choose among them...We cannot subject every suggestion, recommendation, or counsel to the same intensive process of investigation for logical credibility. even the most

skeptical and distrusting patient would be exhausted by such an effort.²⁴

Patient outlook

We have ample evidence to support the claim that a positive outlook on the part of a patient can significantly contribute to the healing effect of medical interventions. Conversely, negative feelings such as despair, hopelessness, and fear caused by a clinical encounter can be highly destructive to the patient's mental attitude.²⁵ Historically, it was partly because of this phenomenon that physicians felt that not disclosing unpleasant facts to their patients or outright lying was part of their healing duties. This argument for the therapeutic advantages of lying and deception has been justifiably attacked both as inaccurate and immoral.

Yet, the general inadequacy of lying as a medical therapy does not undercut the need to be sensitive to the connection between a patient's perception of the therapeutic encounter and the chances for a successful outcome. While we can have confident expectations about the outcome of a reliance relationship, it isn't clear that this would result in the appropriate therapeutic effect. It is hardly conducive to a positive frame of mind to think that those who have been empowered to help us are only doing their best because they get more money. The kind of people who are most likely to instill in us a sense of hope and possibility are people who can convey to us that they believe that we matter, that we are worth saving.²⁶

Moreover, the more serious a medical condition, the less likely it is that mere reliance will be adequate to promote any sort of positive expectations in a patient. If we believe our physician doesn't respect us and is only being conscientious because of fear of a lawsuit, it is hard to see how this will generate a positive frame of mind in us. It is, after all, cold comfort to most of us to know that if we die our lawyer will "get them". To the best of my knowledge there have been no studies that demonstrate a positive correlation between cynical feelings toward health care providers and successful medical outcomes.

Creating an atmosphere of trust

If what I have said is correct, then there are at least five important ways in which physician/patient interactions are significantly affected by trust: patient self-disclosure, flexibility in controlling physician discretionary power, evaluating physician diagnosis/treatment recommendations, patient outlook, and future

encounters with physician. Therefore, because trust is so crucial we are justified in our expectations that trust should be a significant part of our relationship with the physician. This means that the physician/patient relationship meets the criteria I set forth in Chapter Four for a trust relationship. Physicians, qua physicians, acknowledge that they can be trusted and those who trust them are justified in their expectations. Therefore, physicians who neglect to be trustworthy or who are indifferent to our expectations of trust or who intentionally disappoint our trust are violating our trust.

The converse is not true though. It is not the case that patients are obligated to trust physicians as some writers, such as Talcott Parsons and Everett Hughes, seem to imply.²⁷ While such writers are correct in their understanding of the importance of trust in physician/patient interactions, they frequently make the mistake of asserting that the patient therefore must trust the physician. The "must" unfortunately is all too often ambiguous. It might mean that it is critical for the relationship and so patients must be able to trust their physicians for a flourishing relationship. However, to some it may mean that patients must give physicians their trust and if they don't, they have let down their physicians.

By clarifying what is meant by trust and linking trust relationships to betrayal as was done in Chapter Four we are able to avoid some of this conceptual confusion. In seeing trust relationships as the necessary condition for betrayal we are better able to see why writers such as Parsons and Hughes are mistaken. Betrayals or trust violations occur when the trusted party has caused the disappointment and so the locus for moral responsibility lies with the trusted party, not with those doing the trusting. In most physician/patient encounters it is not the physician who is in danger of being betrayed. Patients are not professionals who have made a quasi-explicit acknowledgment that they can be trusted; they are not being empowered to care for the physician's trust objects, and they do not, as a rule, engage in these relationships on a regular basis. Therefore, the obligation for being trustworthy within this relationship is rightly placed upon the physician and not the patient.²⁸

Establishing that physician/patient encounters are trust relationships helps delineate part of the ethical dimension to medical practice. While I believe that understanding these points is critical to a full understanding of the ethical dimensions of medicine, this does not mean that trust is the sole ethical consideration governing physician patient relationships.²⁹ Physicians have moral obligations to patients that

are part of the relationship but are not particularly rooted in considerations of trust. For example, even if trust did not play a significant role in physician/patient relationships, physicians would still need to conduct themselves in accordance with principles of justice or fairness, e.g., to not falsely bill them or to run up unnecessary tests for their own personal gain. Even if trust were not an important part of the relationship, physicians would still need to conduct themselves in accordance with respect for people's autonomy, e.g., not enroll patients in experimental studies against their will.

But even though ethical principles such as these do not stem directly from trust considerations, neither can they be entirely separated from trust. The kind of trust relationship we find between physician and patient is one where the interconnections between trust and other ethical concerns may frequently be hard to specify. Thus, we may, by our trusting, put ourselves in a position where we are treated unjustly or where our autonomy could be violated. We are not always aware of all of our vulnerabilities and so we are not always capable of explicating the exact scope of our trust. Because of this being a trustworthy physician entails paying close attention to areas of vulnerability that patients themselves may not be aware of.

Trustworthy physicians must be aware of their patients' vulnerabilities and act in ways that minimize that vulnerability as much as possible. Some of these vulnerabilities are endemic to the nature of the physician/patient relationship (as we saw from the discussion in the last section), some vulnerabilities will be characteristic of a particular practice (there will be differences between those of which a pediatrician must be conscious and those of concern to a geriatric specialist), and there will be vulnerabilities unique to individual patients based on their particular backgrounds and needs. Moreover, given the important nature of trusting in the relationship, part of being a trustworthy physician will entail learning how to foster trust in patients. If patients don't trust their physician, then they will lose out on the valuable contributions trust makes to the therapeutic encounter.

The combination of these two tasks: taking proper account of patients' vulnerabilities and fostering trust in patients, is the process I call "creating an atmosphere of trust." While both elements are critical, the differences between them must be kept in mind. Fostering trust entails a consideration of patients' perceptions of where they are vulnerable and acting in ways that patients see as addressing these concerns. Being trustworthy entails an awareness of the actual vulnerabilities of the patient and acting in ways that will actually

minimize that vulnerability. The notion that physicians should work to foster trust in their patients will rightly make some readers nervous. Too often a call for fostering trust in patients turns into a discussion on the best techniques for "securing patient compliance" or "making patients more amenable to physician orders". This is not being trustworthy. Indeed, as we can see from Chapter Four, the instilling of trust primarily in order to secure our own goals takes us perilously close to betrayal.

Creating an atmosphere of trust, at either the interpersonal or collective level, is likely to be a complicated and multi-faceted process. As a partial demonstration of what sort of inquiry is involved at the collective level, I will conclude this chapter by taking up Robert Veatch's recommendation that, as patients, we should concentrate on trusting institutions (such as hospitals) that share our deep value system rather than place it in the profession. In order for us to know if this is a practical suggestion we first must consider the limitations and potentials of these collectives in terms of promoting an atmosphere of trust.

This will also allow us to reexamine issues I raised in Chapter Three, regarding the nature of trust and collectives. For example, we saw that professions and institutions differed with regard to how successfully we could apply the notion of trust to them. By comparing and contrasting the ways in which the profession of physicians and hospitals can affect upon individual physician/patient relationships we will be able to explore further some of the complexities surrounding the issues of collectives and trust. A final point is in order. In Chapter Three I pointed out that we interact with collectives in at least two different ways. We may interact with individuals about whom we know very little except that they are representatives of a particular collective. The second way we may interact with collectives is when we consider not any given individual but the actions of the collective as a whole. For the remainder of this section I will be focusing on the second way of interacting with collectives.

Section III: Comparing medical collectives with regard to trust

Delineating the collectives

Robert Veatch makes an interesting point in "Abandoning Informed Consent" when he suggests that patients might be better served by directing their trust toward a specific institution (where he claims that they

can more clearly know the moral framework of the collective), than at the level of the profession (where he believes that such knowledge is not possible).³⁰ While I disagree with Veatch's arguments about the possibility of trust within physician/patient relationships, he has touched on important set of questions regarding trust, collectives, and the physician/patient relationship. What are the limits and potentials of various collectives within the health care industry in terms of creating an atmosphere of trust within physician/patient relationships? More specifically, is it the case that some of these collectives are largely ineffectual in terms of promoting trust? If this were so, we could ignore them entirely (at least in terms of their role in promoting trust) and concentrate on only those collectives that are effective in promoting trust.

There are a wide range of collectives that influence the physician/patient relationship and many different ways in which these collectives communicate that influence. Some of the collectives with the capacity for making an impact on the structure of physician/patient relationships are: the U.S. Congress, international corporations, the large medical insurance companies, the American Medical Association, the American Bar Association, labor unions, and the film and television industry. Trying to study one or two in isolation is a difficult task since the interplay among them is a large part of what shapes the nature of physician/patient encounters. Moreover, the further removed a collective is from the actual practice of medicine the more complicated the issues become. Certainly, though, two of the most influential collectives in influencing the physician/patient interactions would be the profession of medical doctors, and hospitals, within which many physicians practice.

To begin with we need to clarify what we mean by the profession of physicians. Because I wish to focus on the role of collectives in creating more trustworthy physicians who are capable of fostering trust, I will be including more than simply the aggregate of individuals who are licensed medical doctors. For the purposes of the following discussion when I refer to the profession I mean, in addition to the community of licensed medical doctors, those components of the health care industry that are specifically designated to work together to shape and define what it means to be a physician: the medical schools, the licensure boards (at the both the national and state level), the various organizations representing the both generalists and specialists (e.g., AMA, ACP), the government agencies that fund education and research in medicine (e.g. the NIH), and the guiding principles and ethics codes of each of the groups. Each of these elements of the health care

industry has, as one of its central goals, the creation and monitoring of medical doctors.

By hospitals I mean those incorporated institutions, non-profit or otherwise, which are largely self-contained units with a charter, a governing board of trustees, which own and maintain their own buildings and medical equipment, that contains different departments, and which have at least some house staff as well being able to extend or deny admitting privileges to individual physicians. Of course drawing a hard line between these two kinds of collectives is impossible because of the interplay between the two. Hospitals, especially teaching hospitals, also form a key component in shaping and defining what it means to be a physician and the medical profession has a great deal of influence in the kinds of activities in which hospitals can or cannot engage.

Should we focus our energies solely on hospitals?

As we saw in Chapter Three it is usually much easier to apply the notion of trust to an institution or an organization, like a hospital, than it is to a profession, like medical doctors. This has become even more true in recent years as we have seen an increase in the growth of hospital ethics committees and a greater fracturing within the profession as to what constitutes the core ethical commitments of physicians. Therefore, it should be generally much easier to assess the present status of a hospital with regards to trust, and alter its behavior when it comes to promoting trustworthiness among physicians and fostering trust among patients.

Through the work of these committees we have clearer data for comparing the goals/purposes of the hospital, its guiding institutional ethical or political positions, against its actual conduct. Traditionally, almost all hospitals have had mission statements, but an ever increasing number of them have formed ethics committees precisely for the purpose of ensuring that these ethical commitments are honored. Martin Benjamin suggests that in this sense, such committees function as the conscience of the hospital.³¹ They articulate specific policies about common ethical dilemmas, recommend changes in physician/patient interactions that will preserve the ethical integrity of the institution, and oversee these practices to make sure they are implemented as originally intended. Because of these explicit statements we can compare what the institution claims to be its ethical commitments with the actual practice of the physicians who work there. It is also easier for an institution or organization than a profession to act in response to suggestions or incentives or

directives. We have seen in recent years how a hospital can alter the practice of its physicians relatively quickly if powerful enough incentives are brought to bear. When the government felt it was paying too much in Medicare because of unnecessary testing, it reduced the amount it paid to hospitals for running such tests. The hospitals then pressured the physicians who practiced in the hospitals to reduce their number of tests or to encourage only those with adequate insurance to undergo such testing. When labor unions feel that injured workers have been unfairly designated as healthy and thereby unable to collect workman's compensation, they withdraw their patronage of those hospitals that employ such tactics.

When we turn our attention to determining who counts as a justified trusting party we can see, once again, how much easier the task is if we restrict our attention to hospitals. Sometimes an institution's charter establishes who the trusting party will be, as is the case with a veterans hospital. Sometimes, as in the case of rural hospitals, the location helps define the parameters of the trusting population. Sometimes the institution defines itself in terms of a particular patient population, such as when a hospital specializes in pediatrics. Having narrowed the scope of who constitutes a justified trusting party, we are also better placed to delineate what is being trusted within the context of the physician/patient encounters that take place within the institution.

As we have also seen from Chapter Three applying the concept of trust to professions turns out to be more difficult than one might first imagine. This is, in large part, because of the more amorphous nature of this particular kind of collective, especially when we compare it to a relatively self-contained, well defined organization like a hospital. For one, the profession lacks a clearly designated group that speaks for, and directly coordinates, all the salient groups. This makes it much harder both to examine the role of trust in the profession and to alter the behavior of the profession. For example, it is harder specify many of the trust objects and the trusting parties in connection to the profession. The five components discussed in Section II are areas of vulnerability that all patients should be able to trust physicians to safeguard, but are there others in addition to these? Even among physicians themselves this is a controversial question. Some physicians maintain that patient income status is an area of vulnerability that physicians should be cognizant of, and that the obligation to be trustworthy dictates that they should do what they can to mitigate its effects. Some physicians believe that underinsured or uninsured people who need health care are justified in trusting

physicians to do what they can to help them. Thus, while the professional relationship between patient and physician is a trust one, it would appear that assessing the extent of this trust, constructing methods for creating more trustworthy physicians, and fostering trust among patient populations is more readily accomplished at the level of institutions such as hospitals.

Because of these differences it may be more fruitful for those of us interested in promoting trustworthiness and fostering trust to restrict our energies to hospitals. Ultimately we might accomplish more in this way than by trying to figure out what the profession ought to do to shape and support trust between physicians and patients. For example, it would be easier at the institutional level than at the level of the profession to ascertain what vulnerabilities are common to patient populations when considered in terms of their location. We can see this to some extent already when we compare how rural and urban medical centers allocate resources and support staff. Rural hospitals are not as likely as primary health care institutions in urban areas to have a patient population that requires highly advanced emergency trauma rooms that can handle a large volume of gunshot victims. It may be that the patients need more long term low maintenance care, well baby clinics, and physicians who are willing to travel to isolated areas.

Likewise, the greater ease with which we can determine who exactly is a justified trusting patient will allow for an easier time in determining what they themselves perceive of as their vulnerable areas. This is especially so when we recall that most hospitals are divided up into various units that specialize in particular medical conditions: emergency, pediatrics, obstetrics, mental, etc. While there has been a great deal written about the problems with too strict a division of labor, it is important to see the typical division with a hospital can work in a positive manner with regard to trust. A unit within a hospital that specializes in a particular kind of treatment will have, by its very nature, regular contact with patients who have a common medical experience. This means it can target its surveys and interviews to solicit exactly what are commonly perceived areas of vulnerability for this sort of medical experience. For example, those units which deal with large numbers of patients at the end of life can develop methods for testing this population to see what they themselves take to be their own particular vulnerabilities which may be as diverse as fear of becoming bankrupted, ending their life in severe pain, being attached to too much machinery, or losing consciousness too quickly.

It may also be the case that where patient perception and reality conflict an institution, rather than the profession, will be better placed to deal with any potential conflicts. The ways in which the institution interacts with its physicians and patients can be structured to educate patients to the reality of certain situations, without dismissing their concerns. For example, it may be that the actual percentage of veterans who have some health related illnesses from exposure to Agent Orange is rather low compared to other types of medical problems for veterans. However, this may be an area where a number of veterans perceive themselves to be vulnerable. Balancing these two issues would require that the institution make sure that physicians are aware that this is a matter of concern for their patients, as well as making sure they are adequately prepared to recognize genuine cases of such illness when it occurs. The hospital would try to provide the patients with clear, understandable information about the reality of the risks involved, so that physicians would be able to continue to focus on the real problems that veterans tend to have. In any case, the greater flexibility of a hospital, as compared to the profession, allows for a greater degree of creativity in crafting solutions to deal with the complexities of trust.

Veatch's suggestion that patients should seek out institutions that share their ethical frameworks implicitly recognizes these facts about the differences between institutions and professions. It is because of this that he recommends patients seek out those hospitals or institutions that reflect their own deep values. For example, he points to hospice organizations as a good example of what he intends. While a hospice is not a hospital, we can see what he means. Hospice organizations deliberately seek to provide medical services that are in tune with what a certain percentage of the populace sees as a good death. Hospice centers are not trying to appeal to everyone or to provide every sort of health care. This understanding of whose trust they are acknowledging and the nature of the trust objects is reflected in a number of ways: their mission statements, their presentations to the public, the principles governing patient/physician encounters, their consultations with family members, the makeup of their governing boards, and so on. If patients who are cared for in a hospice are disappointed because the physicians don't employ every possible medical technology available to keep them alive then they have not been betrayed or had their trust violated.

The upshot of all this would be a move away from trying to influence physician behavior and patient perception about trust at the level of the profession and to focus on these goals at the level of individual

institutions. We would dismantle continuing medical education sponsored at the professional level and increase the number of programs that directly target the particular problems faced by individual hospitals. Future physicians would all be required to take a medical ethics component of medical education that is directly tied to the concerns and particularities of the institutions where they are undergoing their residencies. Regular reviews of the hospital's standard operating procedures would be conducted to see how well it is following through on its caring for the trust of its patients. This would be done at both the level of the individual units and at the hospital as a whole. The public relations sections of the hospitals would need to incorporate members of the ethics committee to be sure that the institution is genuinely fostering trust and not merely manipulating it for the benefit of the hospital.

While I believe all of the above suggestions merit serious consideration, there are definite limitations to the capacity of hospitals to influence physician/patient relationships with regard to trust.

The SUPPORT Study

Redirecting our focus away from the profession and toward hospitals will probably be the most effective way of improving some aspects of the physician/patient relationship. However, we can also see from recent research that there are definite limits to such an approach. In a recent issue of the Journal of the American Medical Association, researchers from the Study to Understand Prognosis and Preferences for Outcomes and Risks of Treatment (abbreviated as SUPPORT) released the results of an extensive five-year study.³² The purpose of the study was to understand what patients feared about the experience of dying in American hospitals and then to design, implement, and evaluate interventions that would address these concerns. The first phase of the study entailed researchers collecting data about the communication patterns between dying patients and their physicians, patients' preferences in terms of Do Not Resuscitate Orders and pain levels, the involvement of the patients' families in discussions and decisions about the illness and treatments, physicians' awareness of the patient preferences, patients' satisfaction level, and the level of resources expended on the patient's care. Phase II was intended to determine weaknesses in patient care with regard to these issues and to construct interventions that would rectify these problems. A two year randomized clinical trial was then conducted with one group of patients receiving this special attention and a control group

not receiving it.

In terms of affecting physician behavior or patient perception the study was essentially a failure. Two commentators, writing for the **Hastings Center Report**, made the following assessment of the study.

When the Phase II results were tabulated the outcome was startling. The five main categories identified in Phase I had not been appreciably affected. There was no significant change in the timing of DNR orders, in the number of undesirable days, in the prevalence of pain, or in the resources consumed. Moreover, the intervention had not altered patients' reported preferences regarding either resuscitation or the levels of communication with physicians.³³

Because of the significance of the study the **Hastings Center Report** published a special supplement to their Nov/Dec 1995 issue and invited a number of leading thinkers in medicine and bioethics to comment on the study. While most commentators agreed that the Phase II part of the study had failed to accomplish what the researchers thought it would do, there was a great deal of debate about how to interpret this data. Some commentators, such as Bernard Lo, Donald Berwick, and Linda Emmanuel, identified areas where they thought the interventions designed by SUPPORT were flawed.³⁴ They contended that there was too little attention paid to the means of communication between physicians and patients, too much reliance on nurses, and so on. Others, such as Daniel Callahan, argued that there is a fundamental unclarity about death that permeates all of American culture.³⁵ In his eyes, too many people view death as nothing but a "biological accident", and this manifests itself in a confusion about what to do with patients close to death in hospitals. Others, such as Mildred Solomon, argued that the findings, as reported in the JAMA article, are inconclusive, and we need more specific information about how key aspects of the intervention were conducted, before we can draw any substantive conclusions about what went right and what went wrong.³⁶

One of the commentators, Howard Brody, suggested that a central problem with the study was with the kind of physician counted on to implement the interventions. Brody pointed out that, because of the nature of the five hospitals used as base sites, it is most likely that the dominant group of physicians in the study were specialists, not physicians trained in primary care medicine. He went on to say that, given the differences in the approach to physician/patient encounters between primary care physicians and specialists, the results of the study are not too surprising,

Training in primary care reflects an effort to focus on the appropriate (rather than routine and unlimited) use of medical technology: on critical appraisal of the

medical literature to determine which interventions have actually been proven to produce superior patient outcomes; and on the importance of behavior and cultural knowledge and skills in understanding disease and in treating patients effectively. Perhaps most important, primary care specialists define themselves not by a set of diseases, organs, or procedures, but rather by a certain type of ongoing relationship with their patients...One naturally wonders if primary care physician attendings would have done a better job of communicating with patients and coordinating care appropriately with the valuable input of the nurse specialists.³⁷

If Brody is correct, then we can see a serious limitation in focusing too narrowly on hospitals as a means of resolving issues of trust. If the hospital is staffed with physicians who tend to see patients in terms of "disease, organs, and procedures," instead of as active participants in an ongoing relationship, it will be much harder to persuade them of the importance of trust.

By the time physicians form any sort of ongoing relationship with a hospital the profession has already done a great deal to shape a physician's professional identity. It is the profession, and not hospitals, that exercises the greatest influence on physicians in their development from undergraduate, pre-med students into full fledged physicians by its control of the medical education system. In shaping the structure and organization of medical education, the profession does a great deal to establish what kinds of people will be physicians. It does this through a whole range of methods: licensure boards, medical school accreditation policies, the public statements of its most influential organizations, where it directs funds for research and education, how it polices violators of ethics violations, and so on. It is much harder to influence someone whose character has already been molded by an intense, prolonged exposure about what it means to be a physician before even stepping through a hospital door. Were hospitals to have a greater influence early on, it would strengthen the argument that we could focus our attention on hospitals.

Further reasons why hospitals are not adequate by themselves

There are other reasons as well for us to be cautious about the capacity of hospitals to influence physician/patient relationships with regards to trust.

1) As we have seen earlier, there are significant commonalities among patients, simply in virtue of being patients, that cross regional, economic, social, race, and religious lines. Self-disclosure is an aspect of physician/patient encounters that raises questions of trust no matter if one is a wealthy Manhattanite, a middle

class farmer, or a poor teenager in the hinterlands. The need for patients to be able clearly to understand the information provided them by their physicians is critical for practically all of us. The same is true for the other components I discussed. It is true that the ways in which these needs are best fulfilled depends a great deal upon the specific dynamics of each individual relationship. However, since they are endemic to the nature of the relationship, it is important for the profession as a whole to examine them critically and discuss them.

2) There is also a danger that directing too much attention away from the profession may have the unintended and unfortunate consequence of fracturing the profession. The less physicians see themselves as engaged in pursuing common goals and purposes the greater the danger of fractionalizing and splintering the profession. Let us reconsider for a moment Veatch's suggestion that institutions and physicians align themselves along shared deep value systems, thereby enhancing the odds that patients will have successful physician/patient relationships. To some extent this makes good sense given what we have seen of the advantages of promoting trust via an institution. However, it also runs the risk of dividing physicians even further into camps of "us" and "them." Such divisions make it easier to believe that the medical problems of another group are not really a matter of great concern. Veatch suggests that there are practices that are structured to specifically address women's issues and to make a strong public commitment to a strong pro-feminist agenda. While this idea has its merits, it also runs the danger of supplying other physicians with an excuse not to concern themselves with feminist issues. Physicians in hospital Y may inappropriately think that their hospital need not bother with seminars and retreats designed to alert physicians to the particular medical vulnerabilities associated with sexism, since there is a perfectly good practice across town that is exclusively devoted to such issues. I am not arguing against setting up hospitals that explicitly embrace specific deep value systems, but I am concerned that it may unintentionally marginalize the very groups it is designed to help.

3) Still another problem is that large numbers of patients are not able to pick and choose which hospitals they would like to attend. Sometimes it is because of geographic restrictions; people living in isolated rural areas do not usually have a wide range of institutions to choose from. A family living in the middle of Nebraska or Montana or Wyoming may have to drive a hundred miles simply to reach a hospital at all. Sometimes the restrictions are economic; insurance plans often have agreements with a limited number of

institutions, and patients go elsewhere only if they are willing to pick up a larger portion of their medical bills. Those with no insurance at all often wait until the last minute and then go to the nearest emergency room. Sometimes restrictions result from a particular medical conditions; patients who need experimental or highly advanced treatments can only go to those institutions staffed by physicians with the requisite skills and facilities. These various restrictions mean that even if there were hospitals that took trust seriously, this might be completely irrelevant to a large number of people. While it might be plausible for wealthy or heavily insured patients to select only those institutions that take seriously the process of promoting trust within physician/patient relationships, such luxury of choice will likely not be available to millions of others.

4) Finally, there are limitations as to how effectively hospitals can alter physician behavior. Despite all the cries of the profession to the contrary, today's physicians still have an enormous amount of autonomy in how they conduct their practice. As Donald Light points out,

The post-Freidson era, from 1970 to the late 1980's, saw a steady trend of dehospitalization and a long-term shift back to office based care. Most doctors (82%) are involved in patient care, and despite all the talk today about physician-executives, the data show no notable up trend in numbers. Office based practice has been rising slowly from 1975 (from 55% to 58.5%), and full-time hospital staff has declined from 10.4 to 8.5 percent in the same period.³⁸

The trend has tended to be for small groups of five to seven practitioners to band together largely for economic reasons, thereby continuing to give each one a large measure of freedom to conduct their practices as they choose. The continued autonomy and freedom from institutional influence is further enhanced by the fact that these groups are also increasingly purchasing much of the equipment and support materials previously supplied via the hospital. As Light says about the nature of these groups,

...their purpose seems largely to share the financing of space, staff, and equipment and to position themselves for handling larger specialty contracts from institutional buyers....An important, perhaps even integral, part of the rapid expansion of groups since the mid-1970's has involved doctors investing in their own clinical laboratories (28% of all groups), radiology laboratories (32%), electrocardiological laboratories (28%), and audiology laboratories (16%). (Additionally, 40 percent of all office based physicians have their own laboratories.) The larger the group is, the more likely it owns one or more of these facilities. For example, 23 percent of three person groups own clinical laboratories and 78 percent of all groups with seventy six to ninety-nine doctors. Large groups also own their own surgical suites: from 15 percent of groups with sixteen to twenty-five people to 41 percent of groups ranging from seventy-six to nine-nine physicians. The hourly charges are very attractive.³⁹

By participating in these smaller groups with economic and technological resources of their own, physicians are less likely to be susceptible to influence from an institution such as a hospital. Indeed, they are more likely to be able to dictate to the hospital exactly what arrangements they want and how much interference they will tolerate. Unfortunately, such small groups would seem to be exceedingly difficult to assess or influence because of their organizational goals and the way they are structured. Although the research does not conclusively prove this, it would seem that the central motivating force for such groups is to use their combined resources almost entirely as a means of allowing each member to conduct his/her practice with minimal outside interference. It might be different if these groups were typically organized around ethical commitments and value systems the way Veatch suggests. The data seems to indicate the explicit consideration of ethical commitments is peripheral at best.

In considering the results of the SUPPORT report and the other features I have presented, we can see that the profession will need to play an important role in promoting trust within the physician/patient relationship. I believe an interesting and important project to undertake would be to study what aspects of the physician/patient relationship are best addressed at the institutional level and which are best dealt with at the professional level. Such a study might help us better distribute our already scarce resources. For instance, it has been argued that traditional continuing medical education has had very little impact on actual physician practice. It may be that the goals of continuing education are impossible to achieve at the professional level, and that we are better served by redirecting those resources at the level of the institution. On the other hand, it may be that an enormous impact can be made on promoting trust within physician/patient relationships simply by instituting large amounts of low-interest loans for students interested in becoming primary care physicians and severely curtailing the number of slots available for specialty residencies.

Concluding remarks to Chapter Five

In this chapter I have attempted to employ the process I presented in Chapter Four to explore concrete issues of trust in daily life. We can see that, despite arguments to the contrary, physician/patient relationships should be conceived of as trust ones. Furthermore, we have seen that there are substantial questions about what kinds of collectives can best promote trust within these relationships. Clearly, all I have

been able to do here is to present the starting point for a more in-depth exploration of the moral dimensions of trust within medicine. However, rather than continue within this field I would like to draw on some of the material from this chapter (and the preceding ones as well) and turn my attention toward trust and teaching.

ENDNOTES

1. I want to be sure that my claims for the importance of trust are not taken too broadly. While I believe that trust is of vital interest I do not believe that all ethical issues are reducible to their connection to trust. For example, my focusing on trust relationships between patients and physicians as a means of exploring the intersection between trust and ethics in medicine is only one of many different moral topics that touch on medicine. There are several who claim that medicine is an inherently moral practice and as such, even if we reduced the role trust plays in it, it would still involve a number of ethical issues.

For that matter neither does it exhaust the number of interesting issues involving trust and medicine. The entry on "Trust" in the **Encyclopedia of Bioethics** Caroline Whitbeck enumerates the following issues involving trust and medicine: "trust between patients and providers", "trust and family members", "trust and medical technology", trust between health care providers", "morality of trust." In addition to these subjects there are significant questions regarding such topics as the relationship between confidentiality and trust, the measurement of trust in relation to the performance of medical tasks, appropriate vs. inappropriate methods for promoting trust, whether private for profit institutions are more trustworthy than public hospitals, which health care delivery systems promote more trust, and so on.

2. Abraham Flexner, "Medical Education in the United States and Canada," **Bulletin** no. 4 (New York: Carnegie Foundation for the Advancement of Teaching, 1910).

3. For a complete copy of the statement see **Journal of the American Medical Association** 264 (1990): 3133.

4. Some may be tempted to assert that deciding whether trust in physicians is justified is a purely empirical question. However, we must remember the distinction made in Chapter Four between "justification" and "warrantedness." If we were examining the question, "Is trust in physicians warranted?" we would be attempting to ascertain whether physicians do, in fact, possess the requisite competency and good will to make trusting successful. In deciding if patients are justified in their beliefs we are examining the strengths and weaknesses of the reasons they put forth for holding their beliefs about physicians. Although there is significant interplay between these two ideas it is important to keep them distinct. As we saw in Chapter Four, trust in someone might very well be justified, but not warranted; or, conversely it might be warranted, but unjustified.

5. Robert Veatch, "Is Trust of Professionals a Coherent Concept?" **Ethics, Trust and the Professions: Philosophical and Cultural Aspects** eds. John Lagan, Robert Veatch, and Edmund Pellegrino, (Washington D.C.: Georgetown University Press, 1992), 159-167.

6. *Ibid.* p.161.

7. Much of his argument is based on Allen Buchanan's article, "The Physician's Knowledge and the Patient's Best Interest," **Ethics, Trust and the Professions**, p.93-112.

8. Dan Brock, "Facts and Values in the Doctor Patient Relationship," **Ethics, Trust, and the Professions**, p.113-138.

9. Thomas Szaz, **Insanity: The Idea and its Consequences** (N.Y.: Wiley, 1987); Peter Sedgwick, "Illness--Mental or Otherwise" **Hastings Center Studies** I (1973): 30-31; H. Tristram Engelhardt, Jr., "The Disease of Masturbation: Values and the Concept of Disease," **Bulletin of the History of Medicine** 48 (Summer 1974): 234-248.

10. I suspect that he means the more radical of the two, because he does say that he thinks trust is not possible even in those cases where we have long standing relationships with the physicians. However, in the discussion section of the conference that was reprinted in **Ethics, Trust, and the Professions** he seems to suggest that establishing trust is impossible because of the severe time constraints. These are, as I have pointed out, two different claims.

11. Robert Veatch, "Abandoning Informed Consent", **Hastings Center Report**, 25, no.2 (1995): 5-12.

12. **Ibid.**, p.5

13. There are additional problems that arise because of an insufficient attention to the fact that trust is almost always about something. Does Veatch think that patients shouldn't trust physicians with sensitive information about their sexual and drug history? Does Veatch believe that patients should not trust their physicians to inform their families in an accurate and timely manner about their medical condition? Does Veatch believe that patients shouldn't trust physicians to implement (or refrain from implementing) specifically designated medical procedures? By focusing on informed consent alone Veatch has restricted his criticism to one part of the doctor/patient relationship and so to characterize the entire relationship as one founded on distrust is too strong.

14. Edmund Pellegrino and David Thomasma, **The Virtues in Medical Practice** (New York: Oxford University Press, 1993) p.74.

15. I wish to thank Martin Benjamin for reminding me of this point.

16. Edmund Pellegrino and David Thomasma, **The Virtues in Medical Practice**; and Edmund Pellegrino, "Trust and Distrust in Professional Ethics," **Ethics Trust and the Professions**, 69-85.

17. Robert Veatch, "Abandoning Informed Consent," p. 11.

18. Bernard Barber, **The Logic and Limits of Trust** (New Brunswick, N.J.: Rutgers University Press, 1983) p.95.

19. This is not to say that trust can be entirely absent from the relationship or that the economy could survive if all trust was absent. As we can see from Chapter Four "low-trust" societies tend not to have as effective economies as "high trust" ones.

20. Kevin Corcoran, "The Relationship of Interpersonal Trust to Self-Disclosure When Confidentiality is Assured," **The Journal of Psychology** 122 (1988): 193-195.

21. Lynda Anderson and Robert Dedrick "Development of the Trust in Physician Scale: A Measure to Assess Interpersonal Trust in Patient-Physician Relationships," **Psychological Reports** 67 (1990): 1091-1100.

22. William Branch, Richard Pels, Robert Lawrence, and Ronald Arky, "Occasional Notes: Becoming a Doctor--Critical Incident Reports from Third Year Medical Students," **New England Journal of Medicine**, 329 (Oct 7 1993): 1130-1.

23. Lynda Anderson and Robert Dedrick, "Development of the Trust in Physician Scale: A Measure to Assess Interpersonal Trust in Patient-Physician Relationships."

24. Edmund Pellegrino and David Thomasma, **The Virtues in Medicine**, p.69.

25.Cf. D.H. Novak, "Therapeutic aspects of the clinical encounter" **Journal of General Internal Medicine** 2 (1989): 346-55; and K.B. Thomas,"General practice consultations: Is there any point in being positive?" **British Medical Journal** 294 (1987): 1200-1202.

26.This is assuming, of course, that we believe they are equally competent.

27.Talcott Parsons, **The Social System** (New York: Free Press of Glencoe, 1951), and "The Sick Role and the Role of the Physician Reconsidered," 53 (Milbank Memorial Fund Quarterly (1975); and Everet Hughes, "Professions," 92 **Dacadalus** (1963).

28.This is not to say that physicians cannot be betrayed. A patient may deliberately deceive a physician for monetary gain or pleasure or any number of other reasons, but the betrayal does not arise because the patient has failed to trust the physician.

29.In this regard I disagree with those such as Michele Carter who believe that trust is the core ethical component both to medicine in particular and to society in general. Cf., **Trust in Medicine** unpublished Ph.D. dissertation (University of Tennessee, 1989).

30.Robert Veatch, "Abandoning Informed Consent."

31.Martin Benjamin, "Individual and Collective Conscience in Bioethics" unpublished.

32.The SUPPORT Principal Investigators, **Journal of the American Medical Association**, (November 22/29, 1995): 1591-1598.

33.Ellen H. Moskowitz and James Lindemann Nelson, "The Best Laid Plans," **Hastings Center Report** 25, (Nov/Dec 1995): S4.

34.Bernard Lo, "End-of-Life Care after Termination of SUPPORT," S6-S9; Donald Berwick, "The SUPPORT Project: Lessons for Action," S21-S23; and Linda Emmanuel, "Structured Deliberation to Improve Decisionmaking for the Seriously Ill," S14-S18. **Hastings Center Report: Special Supplement** 25 (Nov/Dec 1995).

35.Daniel Callahan, "Once Again, Reality: Now Where Do We Go?," S33-S36, **Hastings Center Report** 25 (Nov/Dec 1995).

36.Mildred Solomon, "The Enormity of the Task: SUPPORT and Changing Practice," S28-S33. **Hastings Center Report** 25 (Nov/Dec 1995).

37.Howard Brody "The Best System in the World," **Hastings Center Report** 25, (Nov/Dec 1995): S19.

38.Donald Light, "Countervailing Power: Medicine in the United States," **The Changing Medical Profession**, eds. Frederick W. Hafferty and John B. McKinlay (New York: Oxford University Press, 1993), p.76.

39.**Ibid**, p. 77.

CHAPTER SIX

TRUST AND TEACHING

Introduction

The purpose of this final chapter is to examine the role of trust in the relationship between teacher and student. I began this dissertation with the claim that trust is a phenomenon that occupies a crucial place in our lives and which, therefore, deserves greater attention than it has previously received. To better understand trust I proceeded with an analysis of trust at the most general level. I turned then to how we could apply the concept to collectives, what it means to have violated trust, and what it means to be in a trust relationship. On the basis of this, I constructed a framework for investigating some of the moral dimension of trust and applied this method to the field of medicine. I wish to conclude by turning my attention toward an important aspect of my own life, my profession as a college teacher.

It is unfortunate that we often give the least critical attention to those activities which occupy most of our time. In philosophy, for instance, most of us are employed as teachers. In fact, most of us are more likely to have a significant philosophical impact as teachers than as writers, even though the latter has traditionally been the way in which philosophers measured their contributions to the field.¹ Yet, the conceptual analysis of teaching--what it is, why it is structured the way it is, its role in society and interpersonal relationships, and so on--tends to be ignored. Though a few journals regularly examine these sorts of issues, serious questions about teaching and teaching philosophy are not frequent topics at philosophical colloquia or conferences.² Unfortunately, we tend to set such mundane matters as teaching aside. This is why, when teaching does receive widespread discussion, it is often within the context of a more hot button item such as sexual harassment or grade buying, though few of us sexually abuse or blackmail our students.

I begin, in Section I, by looking at how we should conceive of college teaching, in particular, whether the student/teacher relationship is best conceived along contractual lines. I will compare a relatively straightforward case of contract -- the "service contract" between mechanic and car owner -- with one which merely resembles a contract: the "course syllabus." Using this as a starting point for an analysis of the nature of teacher/student interactions I will argue that they are best understood as trust relationships, not contractual

ones.

Having established that trust forms an essential (or at the very least a highly critical) component in teaching, I examine three different issues regarding trust and teaching college undergraduates. In Section II I consider whether undergraduates should trust universities with regards to their education. In Section III I explicate some of the vulnerabilities of students of which we, as members of the teaching profession, must be cognizant of in order to fulfil our obligations to be trustworthy. As I delineate these vulnerabilities I present some strategies suggested by education theorist Stephen Brookfield to help teachers develop a flourishing trust relationship with their students. Finally, in the last part of Section III I will discuss some of the particular vulnerabilities that a philosophy course engenders in students and how we as philosophy teachers should take these unique vulnerabilities into account as we attempt to become more trustworthy.

Section I: The myth of the syllabus as contract

Contracts

I first seriously started thinking about trust and teaching while in graduate school when I was part of a seminar on teaching philosophy.³ During class, when we were arguing about what features a good syllabus should have, the conversation turned to the more general question of how best to characterize the syllabus. Most of the participants said that it was a contract between themselves and their students. This initially struck me as correct.⁴ Many of my own professors had introduced their courses by explaining that the syllabus was a contract between themselves and their students. When I became a teaching assistant many of the professors with whom I was working said the same thing to their students. As I began to teach my own classes and compare pedagogical methods with my new colleagues, they told me that they too say this as they hand out their syllabi. However, the more I thought about this, the more I came to believe that thinking of the syllabus this way was highly problematic. There are three serious problems with such a view: one, it is a mistaken and superficial conception of the course syllabus; two, thinking of a syllabus along these lines seriously misrepresents the teacher/student relationship; and three, such a view helps foster an environment that is antithetical to learning.

To see why this is so we need to look more closely at an example of a contract. Imagine that the Griffith family station wagon has broken down. Joe takes it to a mechanic, Melissa, whom he has never met before. She tells Joe that she'll look it over and give him an estimate. First, Melissa must be explicit about what she is going to do. She writes in the estimate what she believes is wrong, how she is going to go about investigating the trouble, and how much this is going to cost. In fact, it will probably go through two stages. Melissa will do an initial check to see if it is something simple; then if it's complicated she'll explain what she's going to do next. One important reason for this is to facilitate the negotiation process between Joe and herself. Does he want her to go ahead if this is her proposed solution and this is the cost? Does he want to go elsewhere? At this stage Joe can ask about other options (e.g., stopgap measures that would solve the problem temporarily, check for other problems at the same time). It is entirely sensible to talk about a robust process of negotiating between the two of them as they come to terms about the estimate. Furthermore, this robust sense of negotiation is a positive attribute of the contractual relationship between mechanic and owner, since it doesn't interfere with the process of fixing the car and makes Joe feel more secure.⁵

Second, the estimate creates a severe restriction on what Melissa can do; it limits her discretionary powers. This is not just in the initial phase but throughout the entire time she is responsible for the car. If she feels a need to deviate from the estimate, she is obligated to contact the car owner and explain why she wants to do this additional adjustment, what it will cost, etc. The negotiation process is reopened with an eye to establishing an explicit agreement on what exactly will be done, with input from the owner. Again, this is a positive aspect of constructing the mechanic-owner relationship as a contractual one, since it will not interfere with the job, even though it may slow its completion.⁶

Third, the specificity of the estimate not only limits what Melissa can do on her own initiative, it also restricts what she can leave undone. The job is not completed until all the specific tasks listed on the estimate are finished and at the price agreed to by both parties. She can't return the car to Joe and say, "Well, I got through part of the list, but I left off fixing the battery and your headlights. By the way you aren't going to get any of your money back. I'm charging you the same price that I put on the original estimate."

Fourth, both parties are on relatively equal footing in terms of power. There is a range of options available to Joe. If he doesn't like the proposed estimate or feels that the mechanic is going to try to cheat him,

he can choose to go elsewhere. Joe can rent a car until the old one is fixed. He and Maggie can alternate using the other car. Of course, in some instances this equality of power may not exist. As anyone who has been in a situation where their options were limited can affirm, contracts are only as useful to us as our initial bargaining position permits them to be. If there were only one mechanic for hundreds of miles around and Joe had a deadline to meet, his bargaining position would shrink to practically nil.

Fifth, both parties have access to legal recourse if any of the details of the estimate are violated. The estimate is a legal document and, as such, any questions about it can be resolved within a court of law. In discussions within ethical theory, where the contract model is often used as a metaphor, there is no analogous final arbiter. When settling disputes, the differences between the world of moral discourse and the law become quickly apparent. If Joe doesn't pay Mellisa, she can sue him in civil court. The court system, the roles of lawyers, judges, and state codes governing contracts, are indifferent to the personal viewpoints of individuals on the nature of the law; it is in this way objective. In stark contrast to this, two ethical theorists may be in complete disagreement over whether an action is morally right, and there is no final arbiter to settle the question.

To conclude, at its most elemental level of analysis a contract is an explicit expression of a particular kind of relationship between two or more parties. In a passage where she is comparing trust and contracts, Annette Baier nicely sums up some of core features of this relationship,

Contract enables us to make explicit just what we count on another person to do, in return for what, and should they not do just that, what damages can be extracted from them. The beauty of promise and contract is its explicitness....Another functional excellence of contracts, which is closely connected with the expressness that makes breach easily established and damages or penalty decidable with a show of reasonable justice, is the **security** they offer the trusting party. They make it possible for us not merely to trust at will but to trust with minimal vulnerability. They are a device for trusting others enough for mutually profitable future-involving exchanges without taking the risks trusters usually do take. They are designed for cooperation between mutually suspicious risk-averse strangers...Contracts distribute and redistribute risk so as to minimize it for both parties...⁷

The contract defines the limits and obligations of the relationship and narrowly circumscribes the discretionary power. While I don't wish to conduct a detailed exploration of exactly what constitutes a "contractual relationship" we can say, at minimum, that a contractual relation is one in which the interests of the parties

involved are better served by having a contract than not. Furthermore, in such relationships the contract would not actively prevent the achieving of the goals of the two parties. In fact, it would provide security to the parties by guaranteeing the completion of those goals by threatening those who fail to do so with penalty.

Syllabus

Admittedly, there are similarities between the syllabus and the mechanic's estimate. For example, according to Baier, a central advantage of contracts is their explicitness. Like the mechanic's estimate, a syllabus may also be extremely detailed in describing what is supposed to take place. I have seen 20 page syllabuses in which the professor rehearses some of his own ideas on each of the scheduled topics, what he believes are the central problems in each section, and what he sees as possible solutions. Some might argue that this explicitness provides students with security, in that they now know what will happen if they choose to take the course and what it will cost them in terms of time and effort. Even those teachers who do not go into such detail will supply the students with a schedule of readings, the general structure of the course and the grading scale to be used. Again, some might claim that in doing this, teachers are stipulating what the penalties and rewards will be for the course depending on how well students keep their side of the bargain. A badly written, sloppily researched paper means they haven't kept up their side of the bargain, and the penalty for this is a failing grade. Lastly, teachers seem to make a promise to their students when they hand out the syllabus with its grading scale and schedule of readings. Someone might reasonably claim that when teachers alter one of these items they have broken their contract. If an instructor's syllabus says the final exam is worth 25% of the grade and, then out of the blue, in the last week he/she makes the entire course grade depend upon it, isn't this a breach of contract?

At an initial glance then, it would appear that the syllabus contains many of the salient features of a contract: promise, explicitness, a system of rewards and penalties, security for the parties involved. However, upon closer look, I believe this interpretation is seriously flawed. I will begin by considering the notions of "promise" and "explicitness", two features that Baier singles out as central to the notion of contract. She is surely correct in her claim that a central virtue of contracts is their explicitness. If a contract isn't explicit then it loses part of its value to us. If there are too many loopholes or unclarities in the contract, then the confident

expectations we would normally derive from it will be absent. What we need to be cognizant of is the reasons **why** explicitness helps provide the sort of security found in contracts. In the case of contracts the explicitness is useful because it provides the groundwork for redress against the party that breaches the contract. It delimits the parameters of the relationship in a clear, sharp way that permits us to avoid confusion over whether one party or the other is in the wrong, and thereby who should be liable for damages.

However, while explicitness may be a virtue of contracts this feature alone is not a sufficient condition for labeling something as a contract. The mistaken belief that it is a sufficient condition arises because of a slurring together of the notions of "explicitness" "promise" and "contract." We can see that Baier herself makes this mistake. In the quote above she tends to use "promise" and "contract" and "explicitness" interchangeably. She then draws a line with trust on one side and contracts on the other. In framing such a sharp contrast between trust and contracts, it is easy to think that features of one are mutually exclusive of the other, that what is true of contract is not so of trust and vice versa. However, we may be very explicit about what we are planning to do for someone who is trusting us. Joe may tell Maggie that he is going to rent the family a two story house with plenty of yardspace, two bathrooms, an enclosed driveway in a neighborhood near a river. However, the explicitness with which he has expressed his intentions doesn't mean that he has just made a contract with Maggie.

A similar sort of confusion occurs when it comes to the notion of promise. Baier's manner of writing makes it seem as though promises can only be a feature of contracts and not trust. Making people a promise is not the same thing as making a contract with them. If Joe promises Maggie that he is going to rent such a place, this does not mean he has drawn up a contract with her. It is true that his promise would have more moral force than simply a detailed expression of his intentions. However, a promise can have moral force and obligate someone, without its being equated with a contract. To properly call something a contract it should have all or most of features we looked at in the case of the estimate.

I am skeptical that a syllabus is best thought of as a promise of some sort. However, even if we do construe it that way this, by itself, does not make it a contract. The confusion arises when we assume that the moment someone states an explicit intention or makes a promise the relationship becomes a contractual one. Charles Fried points out that while contract may be a version of promise the reverse is not necessarily so.⁸

If contract is really discrete and if it is really based in promise, then whenever there has been a promise in the picture (even only a potential promise) contractual principles must govern the whole relation. To state the argument is to reveal it as a non sequitur. It is a logical fallacy of which the classical exponents of contract as promise were themselves supremely guilty...⁹

It is true that professors who capriciously alter their courses have done something wrong.

Nonetheless, while they may be immoral, their actions do not automatically translate to breach of contract. A syllabus can certainly be explicit. It may even be that students would be better served if the syllabi teachers wrote were more detailed. However, explicitness is not a sufficient condition for calling something a contract. In the case of the estimate we saw that the estimate as a contract helps bring security to the relationship. In doing so, it does not actively interfere with the flourishing of Joe and Mellisa's relationship. By contrast, constructing a student/teacher relationship along the lines of a contract would actively interfere with the goal of the relationship: the furtherance of the student's education.

To begin with, let us return to the issue of explicitness. As we have seen, explicitness is not a sufficient condition for calling something a contract. We can see why this is so when we recognize that people are explicit for different reasons. Professors who hand out a highly detailed syllabus are not being explicit for the same kind of reasons that the mechanic is. In the case of the professor the explicit detail is meant to aid the student in understanding the material, to explain why these topics were chosen, why they are significant, and what path the course is supposed to take. Of course, a professor could design an extremely detailed syllabus in which the primary function of the explicit detail was to let both parties know if someone had failed in their part of the bargain. Still, a teacher who constructs a syllabus along those lines is likely to create a highly antagonistic starting point for the course. It would signal to students that they are not trusted, that they are seen as the sort of people who will battle over picayune details, and that the teacher is ready for a fight if any student wants to start one. This mistake is akin to the misconception doctors sometimes suffer from in confusing the informed consent form with the idea of informed consent.

Second, the purpose of the syllabus is not to provide a foundation for negotiation between two or more parties. There is, as a rule, no reasonable possibility for the students to make any substantive suggestions about what should be covered and what should be left out; allowing for such strong latitude would be antithetical to good teaching. Teachers who lack a clear, well thought out vision of the course prior to setting

foot in the classroom haven't done an important part of the job. Even with this vision there are factors beyond the teacher's control, but which, in the students' eyes, may be essential to a good education. One obvious factor is that teachers are not just teaching to one person but to an entire class. Because there are a number of students there are severe restrictions as to how well teachers can specify what will, in fact, happen in the course of the term. If the student believes that part of a good education is to engage in a vigorous debate with other students, there is little the professor can do if the rest of the class won't contribute. Classes have their own dynamics, even ones the professor has taught for years. To say that part of the hour will be devoted to class discussion, part of it will be lecture and so on, is usually the teacher's hopeful characterization of the course if everything goes according to plan.

The flip side of this aspect of teaching is that it is next to impossible to list all the demands and requirements that a course may entail. There are many implicit aspects of a course that would be impractical to list in the syllabus. Professors do not usually put in their syllabi that reading newspapers, showing up in bathrobes, snoring or bringing pizzas to class constitutes unacceptable behavior. However, if students engage in these activities it would seem odd to have to say, "You're right, I didn't prohibit such things in the syllabus, go ahead."

Third, one of the prime advantages of the specificity of the mechanic's estimate is its restriction on the discretionary power of the mechanic to perform additional repairs which are not authorized by the estimate. To similarly circumscribe the discretionary powers of a teacher would be disastrous. Teachers who feel that the class is becoming confused over a central issue may want to slow down and devote more time to this particular area. Perhaps they will supplement one of the original articles with another which treats the topic in greater detail. Or maybe they will devote a class period exclusively to a presentation designed to rectify the students' lack of knowledge in an area. To insist that new material not be added since it isn't on the original syllabus would be detrimental to students and interfere with the goal of the educational process. Of course, this means that teachers must seriously consider dropping material from the original syllabus to make room for this new material. The same goes for deciding what to leave out. Teachers sometimes find themselves looking at four weeks of material and one week left in which to do it. However, to demand that this material be covered or else the students will receive partial remuneration would be absurd. We can all remember those classes we

have had where the instructor vainly tries to race through a mountain of material in a short space of time.

Fourth, it is also frequently the case that the student doesn't have the option of "going elsewhere" as we usually do with a car mechanic. In a small college only one professor may be responsible for all or most of the courses students need to take in order to complete their distribution requirements or fulfill a special requirement in their major. In a large university a similar version of this problem exists, since the professors specialize and one or two professors may be responsible for certain courses the student needs. We have all, in the course of college or graduate school, run into those classes that we couldn't avoid no matter how hard we tried. Our options are often quite limited. In such cases the syllabus does not provide the basis for a decision to engage or not engage in the relationship, since it frequently is not really a genuine option for the student.

Fifth, any "security" students receive from seeing the syllabus as a contract will be largely specious. This is apparent in a number of ways. Professors can always change the syllabus by asking the class to agree to certain changes. Students are often not in a position to know whether a proposed change really will help them learn or whether it has simply been implemented to save the professor some work. Dissenters will risk alienating the instructor as well as their classmates, and so it is much safer simply to go along. It is only after the course has been completed and students have some basis for comparison, that they have any sense of whether the instructor's decision was a good one.

Furthermore, there are limited means for correcting a professor's behavior, even in those cases where there is a clear difference between what takes place in the class and what was written on the syllabus. Even when a teacher actually engages in quite arbitrary behavior, it is not clear what the administrators can do since the syllabus is not a legal document. So long as instructors come up with some reason for the changes, there is little upon which the ombudsman can proceed. Administrators are hesitant to interfere unless the professor's actions are extremely offensive or immoral, and, of course, in the case of the more egregious offenses, such as sexual harassment or abuse, the syllabus is largely irrelevant.

In any case, there are many ways instructors can make their students miserable, without ever straying from what was on their syllabus: assigning material that is too difficult for that stage in the student's career, grading excessively hard, giving little or no thought to the make up of the test, creating tests that ask about trivial details, rambling in lectures, going too fast, ignoring students' comments and questions, reading directly

out of the book for the entire class period. Assignments, tests, grading, lecturing, and so on, are central to the course and the syllabus does nothing to guarantee that they won't be done badly. This is different from a legal contract, like the estimate, wherein Joe can go back to the mechanic and, if the repairs are done sloppily or incompetently, use the estimate as a basis for litigation.

Sixth, grades should not be seen as penalties or rewards assigned to students on the basis of how well they have kept their part of a bargain. Grades, if they are to be useful to students at all, should be a way for them to gauge how well they have understood or incorporated the lessons of the course. A high grade is a sign that they have grasped the crucial ideas or concepts of the course and can employ them in a fairly sophisticated manner for someone at their level. A failing grade should not be thought of as a penalty because they have not fulfilled their part of the bargain. Again, if a grade has any use at all, it should be as a way of saying, "You are demonstrating by your work that you don't understand what we're trying to do in this course." Of course, there are a number of better ways than grades for accomplishing this task, but this should only cause us to reexamine once again what the real rationale is behind maintaining a grading system. Unfortunately, in my experience there are many students who view the grades as a reward/penalty system. Because of this they don't care what the grade says about the work they have done, they simply want a different grade. In doing so they mistake the grade as the point of the relationship, rather than a reflection of how successfully they are learning. The more teachers present the syllabus as a contract the more they reinforce this destructive notion.

As we can see then, a syllabus bears only a superficial resemblance to a contract. A contract describes, defines and delimits the relationship between the parties. In contractual relationships the interests of the parties are better served by having a contract than by not having one (or at the very least a contract does not interfere with the flourishing of that relationship). Overall, the relationship of the student to professor is not well conceived in contractual terms. The very specificity of the contract and the demand that this specificity be honored works against the goals of education. Furthermore, much of what is important in teaching is not determined by what is in the syllabus, and so the security a contract provides is absent in the case of a syllabus.

The more we try to make syllabi like contracts the more we create severe problems for our students and ourselves. This is not surprising once we recognize that the motivations bringing teachers and students together should not be the same kind that cause people to make a contract. It should not be mutually suspicious

people who have a temporary need of each other and who are trying to maximize their security by minimizing their vulnerability as much as possible. Thinking of the course syllabus as a contract is not the sole or even primary cause of this destructive confusion. However, it is a reflection of the confusion and simultaneously contributes to it. In one way it is similar to the problem of racist jokes. Such jokes are not the primary cause of racism, but they are representative of a racist world view as well as a means of fostering that world view.

If what I have said is correct then the teacher/student relationship should not be thought of as a contractual one, but rather, teachers, like doctors, should be thought of as involved in trust relationships. The plausibility of this becomes apparent once we recognize that the teacher/student relationship has many of the same elements presented in chapter five as critical to the flourishing of the relationship.

Teacher/student as trust relationship

In addition to the discretionary powers they have in structuring the course, teachers have ongoing discretionary powers in a number of other ways. In assigning grades teachers are free to rely on a variety of formats: multiple choice, in-class essay exams, class presentations, groups projects, term papers, or any combination thereof. Students have their own preferences with regard to such formats and frequently believe that one approach is more accurate in testing their knowledge than others. However, students seldom have any input on what format will be employed. The actual grading process itself is an exercise in discretionary power since the criteria used to distinguish between the borderline grades such as A- and B+ or B- and C+ are often fairly nebulous. This is not to say that teachers make these decisions in an uninformed manner or that they assign the grades arbitrarily. However, it is true that in many circumstances they might just as easily have put the students in one group as another. Of course, for many students the difference between these grades is extremely important. In both these aspects the students keenly feel their vulnerability to the discretionary powers of the teacher.

It is also the case that students care what their teachers say about them. A single, well placed compliment from a teacher can make students think that they matter and that they have something important to say. A positive remark about their writing can make them aspire to develop that piece into something more substantial. Most people have had teachers whose encouragement was essential in helping them believe they

could toil on toward their goals. Of course the reverse is true as well. No one likes to be ridiculed or abused, but it is even more painful when done by an authority figure. Most students have encountered professors who ask a question of their class and when the answer they expect is not forthcoming, grimace at the class, heave a loud sigh, and supply the answer they want. If one encounters such people outside of the classroom they can be dismissed as pompous bores. It is harder to be so casual if we have been told that the person ridiculing us is an expert in his/her field and someone whose opinion is supposed to matter. When teachers make blatantly deprecating or sarcastic remarks about students in class or on papers, the effects can be devastating. Students may react by writing or saying only those things they believe teachers want to hear, instead of trying to voice their own insights, not just in that class but in all the rest of their college courses. Unfortunately, the more deeply felt or more important the material is to the student, the more crushing the effect on the student's self esteem. Therefore, students who try to be genuinely reflective in their work may feel even more violated by cruel or insensitive or callous criticism. Eventually, if this sort of thing happens often enough, students will either stop caring what the professor says, or worse, stop caring about their own work and give up.

Professors and students have to be honest with each other if the relationship is going to work. Students must be able to profess their views about subjects, state what areas they think require further investigation, and indicate when they believe the professors are wrong. Unless students are honest, professors will be unable to evaluate accurately their skills and potentials. If students only provide the responses they think their professors want to hear, it will be hard to know if they genuinely understand. The reverse is true as well. If professors lie or deceive their students, such actions may give the students an entirely erroneous impression of their capacities. There is also the fact that what is at stake here, a college education, is something the student values highly. This is so whether it is valued intrinsically, for the knowledge and skills the college inculcates into the student, or instrumentally, as a necessary step to obtaining a good job or profession. While the debate about the value of a college education goes on, the value placed on it by millions of students is demonstrated by the vast numbers seeking it and the extraordinary effort they must put forth to complete it. The demand for a college degree has risen continually throughout the century. Nearly 2 out of 3 of the graduating seniors from U.S. high schools will be attending some form of higher education in the next fall. Many of these will be taking out a number of loans and working two to three jobs to pay for their schooling.¹⁰

These various elements--the ongoing discretionary powers of the teacher, the vulnerability of the students, the value the students place on their education, the need for honesty--all come together in a way that makes teacher/student encounters best characterized as trust relationships. The importance of trust is reflected in students' own perceptions of their learning experience. Stephen Brookfield, a professor in the Department of Higher and Adult Education at Teachers College, Columbia University, New York, has conducted extensive research into how students perceive their own learning experience. One of the tools he has found most revealing about student learning processes is what he calls "critical incident" questionnaires and exercises. These questionnaires and exercises are designed to elicit specific events that are recalled vividly and easily because of their particular significance. The questionnaires are relatively easy to answer and thereby non-intimidating. Rather than looking for general feelings of the students about the class, the students are asked to remember particular incidents in the class that represented both the highs and lows. They are asked to list characteristics and behaviors of the teacher they found most helpful to their learning, and give examples of occasions when these traits were observable. The exercises seek much the same kinds of information as the questionnaires but do so in an essay format. Brookfield then compared the data he had accumulated with the data gathered by education researchers on similar topics and reached the following conclusions:

The importance of trust is highlighted time and again in student's critical incident responses and in the studies of the experience of learning...In speaking of transformative learning events, students often make explicit mention of how teacher's action and the trust these inspire or destroy, are crucial to learning.¹¹

As we saw in Chapter Five, where trusting is necessary for the flourishing of the relationship, the people who enter into these relationships take on the corresponding responsibility to take that trust seriously. Given the nature of the relationship, teachers have an obligation to be trustworthy and students are justified in expecting that trusting teachers is warranted. When teachers don't take this seriously they violate their student's trust.¹²

Section II: Being trustworthy and the commodification of education

Preliminary remarks

If a trust relationship is to flourish we need to look for ways to foster trust and to be trustworthy. In the field of teaching this means that those of us connected with teaching need to be trustworthy and to foster trust in our students. As we have seen from Chapters Two and Three we can consider these questions at different levels. We can explore them at an interpersonal level, that is, within the context of a relationship we have with a particular student. Or we can explore them at the collective level, that is by focusing on those institutions, professions, and organizations connected with teaching. To do the latter means we need to identify which collective we are considering, determine who is the trusting party, and designate the trust object. We can then compare the limitations and potentials of various collectives with regard to trust, as we did in Chapter Five. Or we may inquire as to the stated goals, ethical aims and political objectives of a collective and compare these with its actual actions. In these next two sections I will only be focusing on trustworthiness and fostering trust at the collective level. I will first examine whether universities are being trustworthy when it comes to undergraduate education.¹³ Then, in Section III I will consider how we, as members of the teaching profession, can be more trustworthy and foster trust in our students.

Universities and undergraduate education

There are many different trust objects we might consider with regard to universities. We might consider whether universities are the best party to trust with research into advanced scientific projects. We might consider whether they are the best party to trust with the development of amateur basketball and football players into professionals. However, their central role historically has been to provide an undergraduate education. Almost all universities include in their mission statement an explicit commitment to effective teaching of their undergraduate students. This is hardly surprising since presumably an important reason the students are at college is so they can be taught. The vast majority of students will not be going on to graduate school so the merits, whatever they may be, of the institution's graduate school are less important to them. For most students the four to five years they spend as an undergraduate form their entire college education

experience. This does not mean that the university will actually teach them; universities are not the sort of entity that can engage in this kind of activity. The university's role in the process is to provide the environment in which the successful teaching of undergraduates can take place. However, there are four ways in which universities are increasingly demonstrating an indifference to the teaching of undergraduates: the increasing teacher/student ratio, the increase in part time or irregular faculty to do the teaching; the lack of formal training for college teachers; and the undervaluing of teaching excellence in evaluating professors for tenure and promotion.

First, an increasing amount of teaching is being done in larger groups. Partly this is because the increase in the numbers of college students has not been met by a corresponding increase in either faculty or institutions. Between 1949 and 1989 the number of students in higher education increased five times, the number of faculty three times, and the number of institutions only twice.¹⁴ This translates into an increase in teacher student ratio from 10:1 to 16:1. This drastic increase in the teacher student ratio has a number of deleterious effects on teaching. In his book **The Moral Collapse of the University**, Bruce Wiltshire points out that,

When professors teach undergraduates they are typically thrust before classes so large and polyglot that it is practically impossible to learn student's names, let alone what would move their hearts and minds. Literacy is gained by speaking and writing and getting intelligent response. But how much of a students' work can be seen in a class of 150?...The temptation to give students the tag-ends of one's energies is alluring--to read off a hastily prepared lecture (or a publishable paper), to **instruct** in some minimal way, not to work up a sweat in trying to **educate**.¹⁵

To educate students requires time to evaluate their work, and to allow them to reflect on this evaluation, and incorporate the lessons for the future. Students need to be taught skills in writing, reading and research in a way that allows them to try these skills out and be corrected on mistakes. The ever widening gap in teacher/student ratio decreases the opportunities for any of this to take place.

Some writers contend that large classes per se are not a problem. They argue that courses that consist of little more than the dissemination of the fundamental principles and equations necessary for a field are more effectively and efficiently taught to mass audiences. Some writers, such as Robert and Jon Solomon, even contend that "many of the best (classes) are the biggest, and it is the large, even huge, classes that make the ideal of democratic education possible."¹⁶ True, a small class is not automatically better than a large lecture

format if the former is taught by an abusive, incompetent dullard and the later is conducted by a talented and inventive teacher who is skilled at effectively communicating to large groups. However, if the advocates of large formats are right, it is not exactly clear what such mass lectures have to offer over video tapes or television that could reach still larger audiences and would allow us to dispense with the presence of a lecturer entirely. It may be the case that we should move toward a more effective use of television and video tape, but this is a separate question. Where the university is actually employing the services of a live instructor, the question is whether an undergraduate's education is best served by making the primary means of teacher-student interaction a lecture by the professor to 300 plus students. As Ernst Benjamin points out in assessing the statistics on teacher/student ratios:

These numbers might be used to suggest substantial improvement in faculty productivity and institutional efficiency. Unfortunately, they are better understood as the source of student, parental, and political dissatisfaction with the student's learning experience.¹⁷

A second problem is that most of those doing the teaching are not full time faculty. Almost everyone has to spend some time in front of undergraduates, but increasingly more institutions are relying on part time faculty or graduate assistants to actually do the teaching. In universities the grading, counseling, evaluating, and further exploration of ideas for first and second year students is often left to graduate students. More and more institutions are hiring adjuncts to teach one or two courses a semester.¹⁸ Bruce Wiltshire summarizes the findings from the **Digest of Educational Statistics** as follows,

In 1986 the portion of part-time teachers in colleges and universities was projected to be 58%. When teaching assistants are added, about two thirds of the work force is either part time or irregular, and, it is safe to say, receives less than half the total remuneration.¹⁹

This is not to say that full time professors are necessarily always better classroom teachers than adjunct faculty or even graduate assistants. However, in order for adjunct faculty to make a living wage, they frequently have to cobble together a number of other part time classes. The result is that their class loads may be two to three times as large as those of full time professors, as well as being spread out over different campuses. In order to manage this work load efficiently they frequently will design tests and assignments whose primary virtue is that they are easy to grade quickly. Those who are unable to put together enough part time work have to hold non-academic positions, which seriously impedes their capacity to keep up on new developments in their field. This

means that undergraduates may be missing out on interesting new advances in these fields.

A third ongoing problem is that regardless of whether we are talking about full time or part time professors or graduate assistants, there is little to no formal training in the craft of college teaching. While there are certainly exceptions most universities do little to encourage various departments to actively seek good potential teachers when recruiting graduate students. With regard to teaching graduate students how to teach, Kenneth Eble describes the dilemma as follows

In almost all graduate programs, the main emphasis is on mastery of the knowledge of a field and demonstration of research competence in some aspect of that field. These pressures squeeze out all other study and even diminish the attention a candidate might give to such an important matter as developing teaching skills. Moreover, the bias against formal "education" tends to place a barrier between subject matter department and those engaged in education. It is a rare graduate student who can cross such a barrier to include work in pedagogy or even to seek guidance about teaching and learning.²⁰

Because of this the future professor's preparation as a teacher is haphazard and uninformed by those few resources the university does manage to offer for those interested in developing their teaching skills.

Finally, a commitment to teaching is systematically undervalued in evaluations of professors for promotion and tenure. While there has been a great deal of talk about the need for increasing the role teaching excellence plays in tenure and promotion, there is little evidence that such policies have actually been effectively implemented in universities. Martin J. Finklestein's book, **The Academic Profession** is a synthesis of the social science research conducted since 1945. He summarized the findings regarding the salient factors for academic advancement as follows:

What are the most important arbiters of organizational advancement? The vast majority of studies suggest that they are performance factors--research productivity, attainment of the terminal degree, and relative emphasis on components of the academic role (especially time spent in administration and, to a lesser extent, institutional service). Faculty who publish, who assume administrative responsibilities, and who serve on committees are rewarded for their efforts with promotion and salary increments.²¹

Furthermore, these factors interact with each other in ways that only exacerbate the problem. For instance, by its ongoing emphasis on publications and committee work as arbiters of organizational advancement, the university does little to encourage the various departments to develop their students into effective future teachers. The departments must decide what skills they should be passing onto their graduate

assistants; those which will make them good teachers or those which will help them in their careers? This means the various departments can either guide their students into workshops and seminars to help develop them into good teachers, or they can spend their time helping the students publish articles and make presentations at conferences.

Because of these features, it seems as though universities are not being trustworthy with regards to undergraduates and their education. Someone might argue that a problem such as the downplaying of teaching skills in favor of publications is really the fault of the individual professions. The various professions must shoulder their share of the blame, but it is the university that is at least equally responsible for creating the right sort of environment to allow undergraduate teaching to flourish. The responsibilities for ensuring the various departments take trust seriously rests with the university.

Commodification of education

Universities ought to be promoting a relationship of trust between students and teachers. Unfortunately, the ways in which universities actually handle undergraduate teaching tend to promote what I call the commodification of college education. Students are consumers, teachers function as the agents of the corporation, and the college degree is the product of exchange. The students pay their money, and at the end of four to five years they are given a degree that they can go trade in on an attractive career and lifestyle. Against this backdrop it is no small wonder that syllabi are mistakenly seen by both teachers and students as contracts. Contracts are especially effective in governing the sale or exchange of commodities. In the most general sense of the term, commodities are fungible goods or services that are purchased by a consumer from a producer or seller in a market. Consumers and sellers exchanging goods in an open market rely on contracts ranging from the relatively simple to extremely detailed and complicated to make the transactions run more smoothly and provide some measure of protection to the consumer. In the context of their immediate relationship, producers/sellers have no obligations to the consumers of their commodities other than avoiding fraudulent or illegal activities.²² The watchword for the consumer is *caveat emptor*, let the buyer beware.

There is a great deal about modern higher education that makes college students feel as though they are consumers and that their college education is simply one more commodity they are purchasing on the open

market.²³ The university's attitude toward teaching is only one way, albeit an extremely important one, that universities are contributing to commodification. Students are treated in a number of ways that reinforce their feelings as interchangeable, anonymous consumers. It begins before they ever set foot on campus with the ever present emphasis in admissions policies on standardized testing. Prospective students are thereby reduced to ACT and SAT statistics; being told in not so subtle language that their high school experiences are not nearly as important as the numbers on those tests. The increasing teacher student ratios, in addition to being harmful to teaching, also reduces the opportunity for counseling students. Rather than receiving guidance from those who presumably know the institutions well, students are forced to fend for themselves, sifting through promotional blurbs for the courses written by the department members. Often they will rely on student-run, methodologically deficient guides to the teachers or word of mouth from their friends. There is also pressure to declare a major as soon as possible, which makes life easier from an administrative standpoint, but severely restricts a student's sampling of other fields and possible interests. These and other factors contribute to giving students the impression that the university does not see them as individuals who have come to be taught, but rather as consumers who wish to purchase a product.²⁴ It is not surprising then that so many students view the grades as the most important component in the class. The grades for each course are smaller commodities which students gather up as they progress through school and which can then be traded in at the end for the largest product the college has to offer, the degree. This in turn, is to be traded in for a career, and so on. All this makes the contractual model of teacher/student relationships more compelling, even though such a model seriously distorts what is valuable and important in teaching.

Section III: Teachers and trust

The goals of teaching and creating an atmosphere of trust

College professors are an interesting collective when it comes to considering trust. Professors are active members of the university and as such have certain responsibilities and concerns arising from their participation in that collective. This means that those issues I have just discussed regarding undergraduate teaching and the university should be important to them as institutional participants. As members of

department and university wide committees they have an obligation to examine how the problems just discussed are manifesting themselves in their individual institutions and to make proposals on how to rectify the problems. Answering the questions requires balancing the various goals and responsibilities of the university: the university as research institution, employer, component of the city, landlord, etc. On this topic I will not have much to say since the particularities of institutions will largely dictate what specific courses of action ought to be pursued. I believe it would be more useful and interesting to consider ways in which teachers could improve their trustworthiness and foster trust in their students.

The first step to both goals, maximizing trustworthiness and fostering trust, is for teachers to be cognizant of the ways students are vulnerable in the classroom. As Baier points out,

...Where one depends on another's good will, one is necessarily vulnerable to the limits of that good will. One leaves others an opportunity to harm one when one trusts, and also shows one's confidence that they will not take it.²⁵

But what is the nature of the vulnerability in a teacher/student relationship? To know this, it is first sensible to ask, as Baier does,

Why do we leave things we value close enough to others for them to harm them? (Because)...we need their help in creating and then in not merely guarding but looking after the things we most value, so we have no choice but to allow some others to be in a position to harm them.²⁶

The "creation" which students are entrusting to professors is their education and it is because of this that they place themselves in a position where teachers can harm them. I wish to take a moment here to comment on the dual aspect of student vulnerability inherent in education.

The specifics of a student's education will vary from subject to subject but there is an important theme that recurs in much of the classic philosophy of education literature. Jacques Maritain, in **Education at the Crossroads**, contends that the aim of education is, "...to guide man in the evolving dynamism through which he shapes himself as a person--armed with knowledge, strength, and moral virtues...."²⁷ In **Democracy and Education** John Dewey defines it as "...that reconstruction or reorganization of experience which adds to the meaning of experience, and which increases ability to direct the course of subsequent experience."²⁸ In **The Aims of Education** Alfred North Whitehead writes, "One main idea runs through these various chapters. The students are alive, and the purpose of education is to stimulate and guide their self-development."²⁹ What is

common to these various writers is the idea that education aims at increasing autonomous self-development of the students. Furthermore, it is a self-development that we hope will increase their personal freedom and thereby empower them. As Ira Shor puts it,

Critical education prepares students to be their own agents for social change, their own creators of democratic culture. They gain skills of philosophical abstraction which enable them to separate themselves from manipulation and from the routine flow of time.³⁰

The specific challenge for the teacher in the class is to teach the student in a way that will result in their developing skills and understanding in a particular field: skills which were absent before taking the class. The student may learn appreciation for a poem or novel at a variety of levels, or how to design and conduct a physics experiment, how to read beyond the "facts" of the case and thereby have a deeper understanding of history, or how to interpret the way our culture and other cultures function and how these overlap and differ. Such skills and understanding, once imparted to students, enable them to defend their views on their own. No longer do they have to rely on appeals to authority, a stagnant and clumsy method of justification, easily defeated by an intelligent opponent. Instead, they develop the capacity to construct their own systems, reach their own conclusions, defend these with their own arguments. I have said much in the previous section about the vulnerabilities of students, and I will say more still. However, it is important to see that a central goal of education is the self development of students in ways that should ultimately **decrease** their vulnerability.

This will entail that teachers, like physicians, have to do what they can to create an atmosphere of trust. They must be cognizant of a student's vulnerabilities and know how to ensure that these are not violated, and they must develop techniques for fostering trust in their students. I will first consider the vulnerabilities that abound for students, regardless of the particular field they are studying, and then present some techniques for fostering trust in students. I will conclude this chapter by considering some of the vulnerabilities that I believe are peculiar to philosophy students and how philosophy teachers might take these particular vulnerabilities into account.

A trustworthy teacher must be cognizant of a number of vulnerabilities

College students are vulnerable in a number of different ways. There are vulnerabilities students have that they bring with them into the class that have nothing to do with their teachers, and there are those that inevitably accompany the learning process. Becoming more trustworthy will require that teachers be cognizant of these and take them into account in their practice. Stephen Brookfield has identified some of most crucial of these, drawing both from his own experiences and research, and from his analysis of the education literature. A few of the vulnerabilities he found that had the greatest replicability across the curriculum were: 'the imposter syndrome', 'emotionality', 'challenge', 'reflection', and 'a learning community'. As I present each one I will briefly outline Brookfield's suggestions, as well as my own, for how we can take account of them in our attempt to be trustworthy teachers. One of Brookfield's best suggestions for teachers who want to improve their practices is to become students again in some field that will challenge them. This change in perspective from being a teacher back to being a student in a challenging course will remind us of many important aspects of the learning experience. With this in mind I have tried to incorporate my own experiences in undergraduate and graduate school in presenting Brookfield's material.

Brookfield cites a number of studies have found that students who are beginning a program suffer from what is called the imposter syndrome. Many say that they feel shouldn't be there, that they believe administrators made a mistake in letting them in. They see the other students as more sophisticated, more knowledgeable than themselves and that they will eventually be asked to leave. Brookfield points out that since much of this will be a product of the student's upbringing and socialization there are limits to what an instructor can do. He makes three suggestions. First, teachers should continuously reaffirm what is meritorious about a student's work even as they critique it. Referring back to student's earlier contributions as the term proceeds reinforces their sense that they are progressing. Second, teachers should encourage the students to talk to each other about these feelings of intellectual inadequacy. Knowing that one is not the only one to feel like a fraud can be quite liberating. I would especially recommend the older students share their experiences with younger students. When I began graduate school it was a great psychological boost to be told by the senior graduate students, who look at ease in any situation, that they did not always feel this way and that they still suffer from this syndrome. Third, teachers can decrease the intensity which the students experience this

phenomenon by occasionally discussing their own similar experiences.

A second element a trustworthy instructor should be cognizant of is the emotionality of the educational experience for students. The range of emotions includes highly negative experiences of frustration and deep embarrassment when they find out how much they don't know as well as anger and resentment at inappropriate treatment by professors. At the other end of the spectrum is the exhilaration and joy students experience when they accomplish highly difficult tasks or make connections between what previously seemed to be very disparate ideas. It should be noted that such emotionality is not an automatic byproduct of being in a class but of actual learning,

Learning is rarely experienced in an emotionally denuded, anodyne way. This is in contrast to teaching, which is often spoken of by students as exhaustingly, mind-numbingly boring. Evidently the activity of teachers teaching often has little to do with learners learning.³¹

One emotional response that seems to regularly accompany a significant learning experience is a grieving for lost certainties. The teacher often has to challenge many ideas the student might have long held about literature, history, anthropology, and so on. The loss of these ideas, although recognized as acceptable on an intellectual level, can be distressing and disturbing. As a result students may become resentful or angry and covet a return to the previous time when answers seemed more clear and secure.

Brookfield suggests a couple of ways to take account of emotionality in classes. First, if teachers remind themselves of the emotional component to learning they will be less disturbed by emotional displays if they occur in a class. They should also be less inclined to shut down such displays, electing instead to let them run their course. Second, teachers should try to gauge the emotional tenor of their classes, on an ongoing basis, by asking students directly about their reactions to activities or subjects. In doing so teachers will need to be alert to the negative emotions the students are experiencing as well as the positive ones. One particular technique Brookfield has found to be successful is asking the students to speak or write about their most intensely experienced "low" moment in the course. A teacher inviting and encouraging such criticism of their own work goes a long way toward taking some of the sting out of the student's own negative emotional experiences.

A third component was the role of challenges in students' significant learning experience. For many

students their most significant learning experiences were those where they were forced to meet new challenges. It might be when they were faced with learning new skills that didn't come easily, or exploring worldviews that were initially uncomfortable for them, or tackling problems that did not have clear resolutions. Students seem to invariably have mixed emotions about these incidents. They frequently experience intense degrees of fear and consternation at the prospect of failing. Once they have successfully completed the task they feel a sense of liberation as well as an enormous boost in self-confidence. Brookfield warns his readers that there is little that can be done to eliminate the student's fears. It doesn't seem to matter whether teachers assure their students that these fears are normal, or how successful the students are away from college, or what they have accomplished in other courses, or their professional status. When faced with genuine challenges the student's emotions seem invariably to follow this pattern. Therefore, aside from being aware that they are going through this, there is little Brookfield feels teachers can do to alleviate the initial stresses of students.

One way I have found to alleviate the stress is to make sure that students have lower stress assignments early on, mini-challenges as it were. From my own experiences as a learner I found that the larger the stakes and the more complicated the assignment the more intense were my feelings of fear, anger and my overall anxiety level. My sense of vulnerability was lessened, though not vanquished, whenever I had some preparation for a larger or more complicated assignment. This was especially so when the preparation directly involved the same sorts of skills that would be employed in the larger project. It is important to make these progressive for the feelings of self confidence Brookfield refers to only arise when students successfully overcome real challenges, not pseudo ones. Also, while it may be true that we can't remove the fear or anxiety students experience when facing genuine challenges we can do a great many things to make it worse. Teachers who act as though these challenges are "not a big deal" or who blithely dismiss a student's anxiety as the actions of a neurotic gradehound, may severely damage the vulnerable student.

A fourth element students regularly remark on is their lack of an opportunity to reflect on the course material. Students typically say that teachers rush through too much material or pile on too many assignments. This creates in them a sense of regret that what could have been an enriching experience became disconnected and ultimately unsatisfactory. While Brookfield doesn't touch on this issue, it is further exacerbated for students with learning disabilities. It is hard enough to reflect on difficult material but when students cannot,

for reasons beyond their control, even read through it all, reflection is impossible. Clearly one way to help reduce this is to reduce the quantity of material teachers typically assign to students. Creating the balance between too little and too much is a process that can only be developed over time, but each time I teach a course I usually find something that can be left out. Brookfield maintains that effective learning in the classroom requires a period of reflection for students be able to interpret what they have been exposed to in terms of their past experiences or to make connections between the various new ideas they have encountered. He draws some interesting conclusions from this. First, teachers often mistakenly try to promote reflection in students by rushing them to quickly into small group work. If done well such group work can be an excellent chance for students to take the ideas and concepts presented by the teacher and reflect on them with their fellow students. However, unless they are adequately prepared for such work and unless they can see a clear discernable purpose such exercises are perceived as meaningless busy work. It is not that small group work per se is viewed as pointless, but rather that teachers do not often lay the necessary groundwork that would make them opportunities for genuine reflection. Furthermore, students often find that a good lecture provides opportunities for reflection since they are not required to respond to others and can allow themselves the luxury of focusing on a particular idea or thought.

The last element Brookfield discusses is the need for a learning community. Two images constantly come up in students' accounts of their college experience. One is the "survival" metaphor, the sense upon graduating of having survived a threatening, dangerous adventure. The other is that the most crucial factor in surviving higher education was having access to a supportive "learning community." The size of this community seems to vary from two or three to eight to ten, but whatever the number, the function of the group appears to be the same: having people who understood exactly the nature of the pressures, who could be called late at night to help one through a panic attack about a presentation or a test, who could make suggestions about a paper. Such people were indispensable to successfully completing college. The emotional support these groups provide was consistently listed as even more important than any information-exchanging role they might play. In order to take these factors into account we should look for opportunities to initiate these kinds of community wherever possible and sustain them where they already exist. One way we can do this is through the way we design our tests and grading systems. I don't know how many instructors still use a bell curve

method for grading tests, but I believe it promotes a destructive kind of competition. It strikes me that it is only likely to make students reluctant to share insights and ideas with each other for fear of undercutting their own grades. Whenever I employ tests in my classes I make sure the students have all the questions two weeks ahead of time and encourage them to help each other prepare. Brookfield does not discuss computers very much in his work, but I have found that this is an area where advancing computer technology may help. Whenever I have taught at a school with adequate computer facilities I have asked the computer services department to create a special list server for my classes. By punching in the class code the students can then send a message to all the students in the class on e-mail about whatever topic in the course they wish to talk about. In this way I encourage the students to rely less on me and instead to talk to each other and to help each other out. I view my job as a moderator of the discussion, making sure that the students don't become abusive or offensive, and intervening if I think the students are making serious mistakes about the material.

Being cognizant of these ways in which students are vulnerable and adjusting our teaching styles to take account of them is an important way we can become more trustworthy teachers. This commitment to being trustworthy is an essential aspect for the relationship to flourish. I now will turn to Brookfield's suggestions, as well as my own, for how we can foster trust in our students.

Fostering trust in students

The second part of creating an atmosphere of trust is developing the capacity for trust in the other party. To foster trust in students means to engage in actions that will ultimately result in the students trusting us as teachers. They will be disposed to place something that matters to them (e.g., their education) in our hands in the belief that we have the necessary competence and good will to effectively care for it. Unfortunately, students are well aware of the many ways such a relationship may be abused and many of them are understandably anxious upon entering a new class.³² As Brookfield points out, when we face students we may also have to face the accumulations of mistrust nurtured by the actions of cynical and arrogant teachers in the past. This means the goal of fostering trust in students will often be an uphill battle. However, if a teacher fails to foster trust in the students then the relationships will digress into reliance or mere dependence. This can have disastrous results,

Not trusting teachers has several consequences for students. They are unwilling to submit themselves to the perilous uncertainties of new learning. They avoid risk. They keep their most deeply felt concerns private. They view with cynical reserve the exhortations and instructions of teachers. The more profound and meaningful the learning is to students, the more they need to be able to trust their teachers.³³

Being a trustworthy teacher and fostering trust in students are not separate and distinct processes: part of being a trustworthy will entail developing successful techniques of fostering trust. It also means that teachers must continuously remind themselves of why they are fostering trust in their students. Con artists are skilled at fostering trust in their marks, but they do so in order that they may more easily take what they want. There is always the danger that a teacher will promote trust in his/her students simply because it makes them more pliable. The objective of teachers should be to create in students a disposition toward them and the class that will help enhance the self development process discussed above. The disposition should not be encouraged because it makes the students more likely to complete assignments on time, to secure better student evaluations, or to increase the popularity of the teacher's department.

Brookfield asserts that there are two components that make teachers more trustworthy in student's eyes: credibility and authenticity. It is not surprising to find that these two components correspond to essential features of our definition of trust: competency and goodwill.

Teacher credibility refers to teachers' ability to present themselves as people with something to offer students. When teachers have this credibility, student's see them as possessing a breadth of knowledge, depth of insight, and length of experience that far exceeds the students' own. Freire (Shor and Freire, 1987, p.172) describes credibility as the "**critical competence**" that students have a right to expect of their teachers.³⁴ (emphasis my own)

Students who feel their teachers are incompetent are unlikely to engage in any of the activities mentioned above as important for a successful learning experience. As Brookfield points out this means teachers must be careful not to "deny their own credibility." One way they may inadvertently do just this is if they denigrate their own talents and skills in an attempt to reassure their students. If they try to validate the student's experiences and knowledge by saying that they are simply there to help their students realize that they already possess most of the relevant knowledge and skill, students may receive the wrong message. Instead of seeing the teacher as understanding and empathetic, students tend to interpret this as an indicator that the teacher doesn't have much useful to offer them. I believe another way to build our credibility as teachers is by

allowing our enthusiasm for our courses to show through. The more it appears to students as though the subject matters or is exciting to us, the more likely we will be seen as knowing something about it.

Teacher authenticity, the other necessary component for student trust, is the sense students have that their teachers have the requisite good will.

In more specific terms, students see four behaviors as evidence of authenticity: 1) teachers' words and actions are congruent; 2) teachers admit to error, acknowledge fallibility, and make mistakes in full public view of learners; 3) teachers allow aspects of their personhood outside their role as teachers to be revealed to students; and 4) teachers respect learners by listening carefully to students' expressions of concern, by taking care to create opportunities for students' voices to be heard, and by being open to changing their practice as a result of students' suggestions.³⁵

Brookfield argues that there is always an underlying tension between those behaviors we exhibit that reinforce our credibility and those that establish our authenticity. If we come across as too authoritarian or all knowing we establish our competency but at the expense of sacrificing opportunities for establishing our authenticity. While I believe that to some extent Brookfield is right about this, I think that it is more likely that these two features overlap in a number of ways. As we shall see, many of the behaviors that establish us as authentic in the eyes of our students simultaneously reinforce our credibility.

With regard to, "making sure one's actions and words are congruent," Brookfield has two suggestions. First, teachers should be explicit about their organizing vision of the course and their methods of teaching it; and second, that what they say in class and what they do match up. Most good teachers have a clear idea of what it is they want to accomplish in the course and how they hope to achieve this. Most students are able to quickly pick up on this as the course progresses and rightly believe that this vision is dictating much of what happens throughout the term. By clearly explaining all this to their students, teachers show their respect by being honest about an important aspect of the course. Brookfield argues that the congruence between the teacher's actions and words is paramount, for few things destroy a student's trust so quickly as a teacher who says one thing and does another. An example of this behavior that cropped up in numerous student reports concerned teachers who made a special effort to espouse democratic principles in the classroom: that the classroom would be a collaborative learning environment with equal input from the students. However, as the term progressed it became obvious that the teacher's preferences were consistently overriding the students' and

that the course was being largely, though subtly, dictated by the teacher. I venture to say that such behavior by teachers probably instills in students a cynicism that they carry with them into other courses.

Although Brookfield only discusses these topics in his section on teacher authenticity I believe that both these issues are important in establishing credibility with our students. In laying out our vision of the course we have an excellent opportunity to present our knowledge of the forthcoming material in a way that reassures the students that participating in the class is going to be intellectually rewarding. Also, I know from my own experiences as a learner that when a teacher's words and actions diverge I don't always assume they are being disingenuous. More often my reaction is that they probably aren't competent enough with the material or their own teaching to know what's going on in their own classroom.

The second and third set of behaviors cited are "making public mistakes and acknowledging errors," and "revealing non-teaching aspects of oneself." With regard to the later, Brookfield suggests that teachers be ready to refer to enthusiasms, passions and concerns outside of their roles as teachers. Teachers who don't allow students to know anything about them except who they are in the classroom may find their students have a difficult time placing suggestions or criticism in the proper context. Without knowing a bit more about who a teacher is as a person a student may be inclined to assume the worst. If a teacher gives a student negative and extensive criticism on a paper or presentation the student may put it down to a malicious personality and dismiss it. Furthermore, in explaining to students what outside motivations originally drew them to the field, or how the principles they are teaching play themselves out in their lives, teachers can demonstrate their credibility by showing their understanding of the connection between theory and praxis.

When teachers make a mistake in class it humanizes them and when teachers acknowledge their error it helps establish them as honest. This is not to say that teachers should deliberately make a mistake in order to demonstrate that they too are human; only that they need to see that such mistakes can actually be beneficial if handled correctly. Brookfield rightly points out that such incidents will only foster trust if the teacher has already first established his/herself in the student's eyes as credible teacher. It should also be noted that since students can frequently tell when teachers make mistakes, the acknowledgement of an error may also help establish their credibility. When I have encountered teachers who couldn't bring themselves to acknowledge that they had made a mistake it struck me that they were probably not very confident in their knowledge of the

field.

The last component, "showing that teachers take their students seriously," is probably the most important for establishing an instructor's authenticity. There are a number of ways teachers can do this. First, teachers should resist the temptation to "rephrase" student questions in an attempt to spare them embarrassment. Rather than sparing them this sends the message that teachers believe students can't speak intelligently for themselves. Wherever possible, allow other students to clarify the issue when confused about what a student has asked or said. Second, avoid playing favorites. Although this is a commonplace in advice to teachers, it is not always recognized how hard this is to really do. There are always boorish or insensitive students in class, just as there are always ones who are engaging and pleasant. It is simple human nature to prefer talking with the latter and passing over the former. However, indulging in this preference can destroy the trust of students since they see that certain personalities are more likely to win the teacher's favor. Third, teachers should be ready to accept suggestions from students about the structure of the course and be flexible enough to incorporate these suggestions where appropriate. When teachers don't think the suggestion is viable then a clear, full explanation of why will help mitigate the rejection. Fourth, teachers should present regular opportunities for critical analysis of the course and the subject being discussed. This means that no matter how inconsequential or misguided a comment might seem initially, teachers should respond to it seriously. One constant I have found in the teachers I have most respected is the patience I have seen them display with students who were completely off the mark or openly antagonistic or out of their depth. The way these teachers resisted the temptation to score an easy point off the students or slap them down in order to "get on with the class" was impressive. It's easy to be patient with an interesting, exciting student; it is much harder to do so with the ones who need it most.

Finally, it is important to remember that these behaviors can be just that, simply behavior. It is always possible to "act" these ways without any truth behind it. Since teachers are only human it is probably the case that everyone will have days when they don't take their students seriously and so there will be a discrepancy between their outward behavior and their inner feelings. However, teachers need to maintain a watchful stance to make sure that such discrepancies do not become the norm. Otherwise, teachers run the risk of betraying their students by actively promoting trust in them without being trustworthy. The stakes involved in trust

relationships such as teaching are always significant.

Vulnerability in philosophy students

In philosophy the very nature of the subjects studied creates an even deeper level of vulnerability in the student. Philosophy prides itself in being the discipline which examines ultimate foundations, the presuppositions of other fields, the "first principles" as Aristotle said. This means that in many beginning and advanced courses what the teacher is challenging in a rigorous and sustained way is the student's basic framework for understanding the world and themselves; a framework which helps form the core of the student's self-identity and her understanding of her place in the world.

For example, an introductory philosophy course will frequently contain a section on arguments for the existence of God. Many students already have firm opinions on the subject and for those who do not, teachers who have done their job well will have helped the students to see the debate as much more than simply an intellectual exercise. Such teachers will help the students to see that a world with a God in it may look one way and one without a God may look much different. However, once the question becomes personal, it increases the vulnerability of the student. The cosmological, teleological, and ontological arguments all have serious flaws that most philosophy professors will be quick to point out. A concept crucial to students' perception of the universe and their place in it has been challenged as lacking sufficient justification and they may have been told in so many words that they may retain their belief only on pain of being labeled nonrational.

Furthermore, the student's conclusions about the existence of God, as well as other introductory topics, such as personhood or free will, are subjects which the student has been using every day, either consciously or unconsciously, as the basis for decisions about a number of seemingly unrelated topics. When teachers do their job well and help their students to make these connections, students may find even more of their basic world view in question. Whether or not only a human being can be considered a person is going to affect someone's attitudes toward computers and the use of animals in testing consumer products. Students may begin to understand that they may be judged by future generations as similar to slave owners because of what may be considered speciest attitudes toward nonhuman animals. Assumptions about free will help determine their beliefs concerning the fairness of the judicial system or various political theories. They learn

that by accepting the present penal system, they may be viewed by future generations as barbaric as 17th century courts which frequently treated the mentally ill as criminals.

These then are the elements that converge to create a special sort of problem for the philosophy teacher who is concerned with the role of trust in the classroom. On the one hand, the "creative activity" entrusted to a teacher is the education of the student. In a philosophy course this is done by helping students learn to examine in depth and in a rigorous fashion a number of fundamental questions about the world and their place in it. Is the ontological argument sound? Are these presuppositions about free will reasonable to hold? On the other hand, a large part of the process of defining one's identity is done in terms of one's responses to exactly these types of questions. "I believe in God." "I am a good person." "I am a rational person." "I am responsible for many of my actions." Challenging a basic conceptual framework can intensify a student's sense of vulnerability and, thereby, increase the chances that he/she will feel threatened or even violated by the course. As a result the student may opt out of the process by reverting to some form of relativism as a defense mechanism. All this takes on an added dimension when it is recognized that frequently the end result of a philosophy class is an understanding that many important claims about the world which the student had previously believed to be accepted and settled notions are questionable and, perhaps even more devastating, are likely to remain that way.

Carrying out the pedagogical project entrusted to the philosophy teacher by the student while at the same time remaining cognizant of the special vulnerability which this subject engenders requires careful consideration of appropriate teaching methods.

(1) It will be important not to trivialize the activity of learning philosophy. Since most philosophy teachers probably believe that philosophy is important this should not be a problem. However, some activities, such as pop quizzes, may send such unwanted messages, even if done with the reasonable intention of making sure students read the material. It presents students with one more hoop to jump through and has the added disadvantage of saying clearly to the students that they cannot be trusted to read the material. A similar problem may occur when instructors try to interject humor into the classroom via sarcastic or deprecating remarks about people who hold views different from their own. If the students perceive that the issues which seem to them to be important are being treated lightly, then their vulnerability is only increased.

(2) Obviously the selection of readings will do much to frame the process for students. If the readings present too stark a set of options then students may feel backed to the wall. For instance, many courses that discuss the existence of God rely primarily on the three standard philosophical arguments (ontological, cosmological, and teleological) which are then shown to be seriously flawed. Unfortunately, often the teacher will simply stop the discussion there and move on to the next topic. Students who have religious tendencies or consider themselves to be religious people may feel violated in a way that is undoubtedly difficult for them to express. It may seem to them as though they are being asked to make a stark choice between belief in God and rationality. Either continue to believe in God (and be irrational) or be rational (and give up belief in God). However, being asked to reject a belief in God may mean rejecting past and present relationships with their family and loved ones. This can be mitigated by making sure the students are exposed to a broad enough range of readings on the subject, to permit them a sense of the wide range of options open to them in resolving questions regarding belief in God.

(3) It has often been argued that teachers should keep themselves studiously above the fray and not reveal to their students what they personally think about the arguments and topics being studied. The claim is that only by remaining scrupulously neutral can teachers avoid inappropriately influencing students' attitudes. While this may initially sound right in terms of protecting the students' vulnerability, ultimately it will probably have the opposite effect.

First, I am skeptical that professors can actually present a topic, without at least inadvertently revealing their own preferences. Often students can pick up on the numerous verbal and physical cues which reveal their teacher's position. Second, in many courses instructors assign their students a paper or papers. In these assignments the students are supposed to examine critically an assortment of arguments on a topic and make a decision as to which ones are the most compelling, what the flaws are, and what the ramifications are of adopting such a view. This is, as has been argued above, an exposing of deeply personal and fundamental aspects of a person's identity. It hardly seems conducive to a trusting relationship to ask students to make this kind of personal revelation, which will be subjected to a lengthy analysis and graded, but not be willing to engage in a similar act of disclosure. Finally, it may help the students feel more secure if they are presented with someone who has come to grips with the contingencies and uncertainties involved in the process of

philosophy. Students can see for themselves how at least one philosopher, their teacher, can look over a difficult issue, and through reason, reflection, intuition, and argumentation, reach conclusions about what, on the whole, is the best position. By witnessing this process personally they see that this is a process they too can engage in without being a misfit.

Obviously, there is a great deal left to consider regarding what pedagogical techniques are most appropriate when considering the role of trust in the philosophy class. The important point to keep in mind is that if philosophy is as special as many of those who teach it believe it to be, then there must be a careful consideration of what it is that makes it special and how this affects those to whom it is taught.

Concluding remarks to Chapter Six

This chapter has been, as in the case of Chapter Five, an attempt to continue the task I set forth in Chapter Four of demonstrating how one can explore the moral dimensions of trust. By using the framework I outlined we have been able to gain a greater measure of clarity with regard to some ethical issues in college education. We have seen that teaching is a trust relationship and that attempts to recast it as something else can be devastating to the goals of education. We have also seen that the colleges and universities, who are charged with helping to create the atmosphere of trust necessary for teaching, are in danger of violating that trust through their handling of undergraduate education. Finally, we have examined a number of suggestions and proposals for how teachers who wish to be responsive to the role of trust in teaching can do so.

I believe that even though Chapter Five and Six are only partial demonstrations, together, they constitute an adequate demonstration of how an interested philosopher can explore a variety of significant ethical issues involving trust. Of course, the full potential and limits of the approach I have been using can only be determined by similar inquiries into the way in which trust plays itself out in our lives.

ENDNOTES

1. Although this is certainly not the view of all philosophers. Cf. Jon Torgerson, "Why I Teach Philosophy," **Teaching Philosophy** 13 (March 1990): 3-11; and Laura Kaplan, "Teaching as Applied Philosophy," **Teaching Philosophy**, 17, (March 1994): 5-15.

2. For example, in the most recent meeting of the American Philosophical Association in Seattle, Washington (April 3-6), there was not a single paper connected with teaching scheduled to be presented in the main branch of the meeting. There was one paper scheduled for the group, "Association for Philosophy of Education" and a panel discussion scheduled for the APA Committee on Teaching Philosophy in the Two Year Colleges.

3. As yet another example of how the philosophical community has largely ignored teaching as a serious topic this seminar has only been offered on an irregular basis and never made a requirement for Ph.D. students. I have since heard that some other schools are trying requiring such a seminar, but I have not been able to confirm this.

4. Cf. Jeffrey Wolcowitz, "The First Day of Class," **The Art and Craft of Teaching** ed. Margaret Morganroth Gullette (Harvard University Press, 1982), pp.10-24.

5. The fact that many of us actually don't do this says more about our own laziness at becoming smart consumers than it does about the nature of mechanic-owner contracts.

6. It is true that if the mechanic exceeds her contract by fixing some other problem at no additional charge Joe would probably not complain. However, even this "beneficent" violation of the contract might make some of us nervous, since it is also possible that she did not, in fact, fix any problem, but sabotaged the car so as to ensure business at a future date. It is the fact that we don't know whether the mechanic would act in our benefit, and that there is nothing about our relationship which requires our doing so, which has motivated us to make the relationship a contractual one. Over time Joe might develop a relationship with a Melissa to the point where he felt confident enough to simply drop the car off at the garage and say, "Take a look and fix whatever you think needs fixing."

7. **Moral Prejudices: Essays on Ethics**, (England: Harvard University Press, 1994) pp.117-118.

8. Fried argues that this misunderstanding has led a number of writers to mistakenly attack the entire concept of contract as promise.

9. Charles Fried **Contract as Promise: A Theory of Contractual Obligation**, (Cambridge, Mass: Harvard University, 1981), p.19.

10. **U.S. News and World Report: American's Best Colleges**, (Washington D.C.: U.S. News and World Report 1996): 4.

11. Stephen Brookfield, **The Skillful Teacher: On Technique, Trust, and Responsiveness in the Classroom** (San Francisco: Jossey-Bas Publishers, 1991), p. 163.

12. It is likely that a genuine concern for protecting students from such untrustworthy teachers is what motivates many teachers to see the syllabus as a contract. They most likely had to suffer under instructors who were not trustworthy or have colleagues right now who they suspect are that way. However, conceiving of student/teacher relationships in contractualist terms doesn't add anything helpful to our understanding of what is morally wrong with acts, such as blatantly ignoring the syllabus or radically altering it without due consideration for the student's situations. What we have in those cases are trust violations. Such violations as we saw in the conclusion of Chapter Four, are *prima facie* wrong and it is within this framework that we should

look for solutions. Calling them breaches of contract does nothing but obfuscate the situation.

13. In what follows I will focus on universities and not comment explicitly on the smaller liberal arts colleges. One reason for this is that since 1960 there has been a dramatic switch from smaller colleges to larger public universities. Today only 38 percent of all college students attend schools with student populations of less than 1000 and most of the remaining 62 percent attending the large public universities. A second reason is that, at least from my own personal experience, many of these problems apply equally well to the smaller institutions as well.

14. Ernst Benjamin, "A Faculty Response to the Fiscal Crisis," in **Higher Education Under Fire: Politics, Economics, and the Crisis of the Humanities**, ed. Michael Berube and Cary Nelson, (N.Y.: Routledge Press, 1995), p. 56.

15. Bruce Wiltshire, **The Moral Collapse of the University** (New York: State University of New York Press 1990), p. 77.

16. Robert Solomon and Jon Solomon, **Up the University** (Reading Mass: Addison Wesley Publishing Company, 1993), p. 119.

17. Ernst Benjamin, "A Faculty Response to the Fiscal Crisis" **Higher Education Under Fire**, p. 56.

18. At a recent seminar at SUNY at Brockport on improving, teaching an administrator confessed to me that hiring adjuncts was like smoking crack cocaine. One is hesitant to try it at first, but the first time feels, one is soon addicted.

19. Bruce Wiltshire, **The Moral Collapse of the University**, p. 77.

20. Kenneth Eble, **The Aims of College Teaching** (San Francisco: Jossey-Bas, San Francisco, 1983), p. 125.

21. Martin Finklestein, **The Academic Profession: A Synthesis of Social Scientific Inquiry Since World War II** (Ohio: Ohio State University Press, 1984), p. 59.

22. There may be other duties and responsibilities for producers that are assigned to them to protect society, e.g., pollution controls, rules on hiring practices, etc.

23. I don't believe that this was always the case, but my intention here is not to conduct a historical analysis of higher education. My purpose is simply to call attention to its present manifestation.

24. For example, this impression is reinforced by factors the way the media treats the question of undergraduate teaching. On the one hand, there has been a rather constant flow of magazine articles and newspaper series published bemoaning the lack of commitment of universities to undergraduate education. (Cf. "Report Says U.S. Colleges are Failing to Educate," **New York Times**, Dec 5, 1993; and Gene I. Maeroff, "College Teachers, the New Leisure Class," **Wall Street Journal**, Sept. 13, 1993; and "Degrees of Neglect" a series of articles published in the **Chicago Tribune**, June 21-25, 1993). On the other hand, it is interesting to see how the media handles the question itself. Each year there are magazines and books published that are designed to help students find the right college for them. The most famous publication on the market about choosing a university or college is published by a news magazine: the annual issue of **U.S. News and World Report America's Best Colleges**.

However, despite all the talk in the media about the importance of teaching, 1996 is the first year the editors have explicitly devoted any part of the annual issue to helping students find institutions that explicitly make a commitment to undergraduate education. Even here the space and the methodologies they use to consider this is revealing. The methodology used was to ask presidents, provosts and deans of admissions to make a list of

the schools in their area that they felt had an unusually strong commitment to undergraduate teaching. The editors then took the top vote getters and put them all on a single page of the latest issue. Even at the level of a mass produced simple how to booklet, this is hardly a very impressive method for ascertaining what institutions are the best in the nation when it comes to undergraduate teaching.

Furthermore, the issue is instructive in the other ways in which it reinforces the commodification of education. In its section on "How to Use This Guide" the publication makes a clear statement of its goals when the editors write of the purpose of the magazine. "When consumers invest in simple household appliances, this sort of information is freely available. We think it should similarly be available for an educational investment that can cost more than \$110,000." The very idea of ranking these institutions contributes to a "brand name" interpretation of college educations, the higher the ranking the better your education, regardless of what actually happened there. The editors also recently altered their methodologies upgrading the "retention" factor of the ranking from 15% to 25% of the institution's total score. The editors use "retention" to refer to an institution's ability to retain and graduate its students. This has caused some serious concern on the part of some educators because they feel that what is actually being measured here is not commitment to institutional support systems that will help students make it through difficult times. Rather, it represents a commitment that if students pay their money they can be guaranteed the degree even if academic standards need to be lowered. Randall Curren puts the problem this way,

This is deeply insidious, given the role of financial exigencies in relaxing academic standards and "retaining" at any price students who can pay. If it were a direct measure of the quality of mentoring and teaching it would be ok., but surely it is not. What it really says is that higher education is a product that should come with the guarantee that when you pay the purchase price you can relax, enjoy the ride, and be confident it will take you where you want to go. Retention is the educational equivalent to break down rates for cars. (Personal correspondence, Oct.10, 1995)

So both inside and outside the university there are forces at work turning college education into a commodity to be purchased by autonomous consumers in an open market.

25. Annette Baier, **Moral Prejudices**, p.118.

26. *Ibid.*, p.118.

27. Jacques Maritain, **Education at the Crossroads** (New Haven: Yale University Press, 1960), p.10.

28. John Dewey, **Democracy and Education** (Macmillan Press, 1944), p.49.

29. Alfred North Whitehead, **The Aims of Education** (New York, Mentor Press, 1949), p.28.

30. Ira Shor, **Critical Teaching and Everyday Life** (Boston: South End Press, 1980), p.48.

31. Stephen Brookfield, **The Skillful Teacher**, p.46.

32. Some of this anxiety may be decreased (although not eliminated) if they are cognizant that they are protected against some of the more egregious violations of their trust by certain university regulations.

33. *Ibid.*, p.163.

34. *Ibid.* p.164.

35. *Ibid.* p.164.

CONCLUSION

My aim in this dissertation has been to lay the foundation for a substantive exploration of trust. I have argued for why such an exploration is important and speculated as to the reasons why the philosophic community has not given it the attention it merits. I have constructed a definition of trust that allows it to be differentiated from related concepts such as reliance and dependence. I have explained under what conditions we can reasonably apply this definition to collectives. I have outlined some of the moral dimensions of trust and constructed a framework that allows one, within limits, to explore ethical questions involving issues of trust. Finally, I have conducted a partial demonstration of how to apply the material from the first four chapters to issues within the fields of medicine and teaching.

It is some indication of the significance and complexity of trust that, in the space of this work, I have been able to address only a very few of the critical issues pertaining to trust. Because my interest is primarily in the area of ethics I have focused my investigation in a direction that I felt would be most useful in clarifying some of the moral dimensions of trust. Philosophers whose interests are in epistemology, or aesthetics, or philosophy of science, or social/political, or feminism will find other set of topics that require more attention than I have been able to provide here. While there is not, at present, much work being done in any of these fields on the topic of trust, I suspect that this is not due to any lack of potential material there to be explored. As we have repeatedly seen in this work, trust is a multi-faceted topic with enormous significance throughout our lives.

We have found that trust can be a good which most of us seek in one form or another in our lives. We look for people whom we can trust; we honor and treasure such people when we find them, and we fear those who are dismissive or contemptuous of trust. When trust goes out of our marriage or our friendship, it is usually the indication that the relationship is at an end. Moreover, trust, like an Aristotelian virtue, is both a good in itself and one of the means to a good life. The less trust we feel in our lives, the more closed and guarded we become. When we are able to trust we are able to experience more of life, and allow these experiences to enrich the intellectual and spiritual parts of our lives. While it might be possible to have a life devoid of trust, it would not be much of a life. By seeing that trust, reliance, and dependence are not all the same phenomenon we have a better understanding of why this is so.

We have seen that trust can be a critical component of various social goods, such as medicine and college education. Medicine without trust becomes marred by suspicion, fear, and even danger. In the absence of trust medicine loses part of its healing potential and runs the risk of degenerating into mere bio-mechanics. By understanding that the physician/patient relationship is a trust one we are better placed to understand why this is so and that we must be alert to the dangers of disintegrating trust. If the collectives within the health care industry, such as physicians and hospitals, ignore or downplay trust, their patient populations will suffer. The more successfully such collectives can come to grips with issues of trust, the greater the odds are that we can solve a bevy of other problems plaguing medicine, from the need for a more just allocation of scarce resources to the lessening of antagonisms among health care providers. By being attuned to the limitations and potentials of the varied collectives within the health care industry, we can better grasp the kinds of challenges we will face in addressing these questions.

We have seen that the same holds true for college education. While the dangers to students may not be mortal, the consequences of ignoring trust are potentially devastating to the future of students and universities alike. Without trust, college classes can become sterile, mind-numbing games in which teachers pretend to teach while students pretend to learn. Enough such experiences and students may come to hold learning and education in as much contempt as they hold such instructors. Colleges and universities must do more to honor their students trust or the students may come to believe that these institutions see them primarily as customers. If this becomes too widespread students may conclude that they can do without the charade and look elsewhere for those goods the university purported to offer. We have seen that teachers need not wait passively for their students' trust; there are techniques and methods that teachers can use to create an atmosphere of trust within the classroom that will help realize the goals of both parties.

Furthermore, we have seen that, in addition to being a subject worthy of study itself, trust is an excellent vehicle for exploring other topics in philosophy. As we look at how trust functions within some relationship or why it is necessary for the smooth functioning of a particular collective, new philosophic understanding may arise. We may be led to fresh insights on old quandaries or to ponder questions we have previously ignored. To some extent we have seen this process in action throughout the dissertation. By clarifying what we mean by trust we gained greater clarity on related concepts such as faith, dependence, contract, and reliance. By reflecting on the

nature of trust and collectives we developed a further understanding of the nature of medical practice and teaching. In exploring the moral dimensions of trust we learned more about the nature of betrayal. Moreover, these new areas can, themselves, provide us with new opportunities as well. For example, the section clarifying betrayal led us, in turn, to consider the effects of betrayal on individuals and society.

Not only can trust be a powerful tool for opening up new areas of philosophy, but it has great potential as a means of making connections between philosophy and other disciplines. We have seen how the work of psychologists, economists, sociologists, political scientists, literary theorists, novelists, poets, and playwrights can make significant contributions to understanding trust. Having employed these insights to create a more complete analysis of trust we are better placed to take this analysis and apply it to issues and questions in each of these fields. In doing so we are likely to gain further insights into trust that we can use to modify our original analysis. This potential of trust as a tool for creating a dynamic interplay between philosophy and other disciplines is perhaps one of its most exciting features.

Political scientists who are interested in the dynamics of political parties and the electorate could look to see why so many people feel they have been betrayed by both the Democrats and the Republicans. How well can the trust in one man, say a Teddy Roosevelt a George Wallace, or a Ross Perot, translate into the creation of a viable long term political party? Political scientists could explore whether the ability of the President to govern is significantly influenced by the levels of trust within the society both toward the President personally and toward institutions in general. There are also a number of questions about international politics and trust. Do the third world countries distrust the more advanced industrial nations, and if so what are the historical reasons for this distrust? Perhaps it will be impossible to speak of nations trusting each other, although it may make sense to speak of them relying upon each other.

Psychologists can develop tools for learning what factors are the most critical in creating trust between people, as well as what is most likely to destroy trust. In learning about these factors they may be able to discover what techniques are most effective in recreating trust when it has been damaged or lost. They can investigate what factors distinguish trust among friends from that shared by two lovers or between a parent and child. Researchers can look at those people who are prone to trusting (or distrusting) and see what kinds of environments are responsible for shaping this attitude. It may turn out that there is a genetic component to trusting that limits what

we can do to alter people's tendencies to trust.

Sociologists can examine the relationship between trust at the interpersonal level and trust in various societal institutions, such as banks, or the government, or the police. They can explore the differences between how various collectives in society (e.g. the family, high schools, churches) create trust among their members toward the collective and whether there are significant commonalities among them in the ways they go about such tasks. Interested researchers can investigate the history of various minority groups and trust, both with regard to majority communities and with regard to other minority groups.

To some extent this interdisciplinary work is starting to emerge in fields such as economics and business, as we can see from our brief selections in Chapter Four by Thomas Peters, Robert Reich, and Francis Fukuyama. However, there are a plethora of issues they have not been able to take up that also warrant close scrutiny. Economists might examine the relationship between the trust in an industry and its success. It would seem as though an increase in the distrust of a company would result in a decrease in sales of a company's product, but whether this is actually the case merits serious investigation. Do business executives and managers have a clear understanding of the notion of trust and the ramifications of betrayal on both the work force and the public? If a company downsizes while simultaneously increasing the wages of its various top executives, does this affect consumer perceptions of the company's product.

What would make such work so exciting for philosophers is that in answering questions from any of these fields we will inevitably be led back to a further analysis of the nature of trust. We may gain insights as to where our previous analysis has been too limited and in what areas we should direct our investigation. For example, the scope of Chapter Three was limited to whether an individual could trust a collective; this leaves untouched the question of whether a collective can be said to trust. That is, can one collective be said to trust individual (e.g., the university trusts me) or can one collective trust another collective (e.g., Ford trusts the AFL-CIO)? Answering the question of whether countries can be said to trust one another or whether a particular consumer group's distrust of a company affects the sales of the company would require settling the question of whether collectives can be said to trust. Moreover, the results of the work from these other fields may help clarify key elements of the analysis of trust that are, at present, not sufficiently precise. For example, it may be that in examining questions of trust within economics or political science we come to a new understanding of what the notion of "good will"

should mean. Perhaps an investigation into the psychological effects of a company's betrayal of its workers would lead us to a further refinement of the idea of a trust violation. As we see what it means to create an atmosphere of trust within the business community or among nation states we may find new insights on how to more effectively accomplish it in medicine and education. Furthermore, we may find that by deepening our understanding of trust in these other areas helps clarify why trust plays such a significant role in society and in our own lives.

Finally, I hope that by drawing attention to trust we will be led to examine its importance in our own lives on a personal level. We have seen, especially in Chapter Four, that trust is constitutive of, and critical for, a wide range of relationships in our lives. The possibility of creating and maintaining successful trust relationship is intertwined with an awareness of the dangers of violating trust. The impact of a trust violation in our lives may have unforeseen, but devastating consequences; likewise, we may interpret some violation we commit as relatively minor, but the one we violated may be deeply wounded. Yet, how many of us take the time to reflect on our own lives and the ways we interact with others to see if we are doing what we can to avoid violating those whose justified trust we have acknowledged. Who is trust us? Why do the trust us? Have we been discharging the tasks they have given us to do in a trustworthy fashion? Have we violated another's trust, even though we have not betrayed them? Have we done what we could to repair the damages we have caused by violating another's trust? While these are not the kinds of questions that are readily examined within the context of the conventional method of philosophical analysis and writing, they are perhaps some of the most important philosophical problems we face. In wrestling with such issues as these we are trying to answer what Socrates felt was the most basic of philosophic questions, "How shall we live?"

Because of trust's multi-faceted nature and its deep significance in so many aspects of our lives, there is virtually no limit as to its potential as a topic for philosophical inquiry. In my work in this dissertation, especially in the first four chapters, I have attempted to analyze those aspects of trust that will be salient no matter what the field. As we have also seen throughout this work trust defies easy or quick classifications and analysis, so the exact nature and scope any given investigation would take is practically impossible to specify ahead of time. Trust, at either the interpersonal or the collective level, demands a rigorous investigation of the particularities of the circumstances in which the trust is embedded. However, I believe that anyone who is willing to undertake the effort will find that the rewards of exploring and learning about trust are well worth it.

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