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MAKING ROOM FOR SPIRITUALITY IN ETHICAL DECISION-MAKING IN END
OF LIFE CARE: WIDE REFLECTIVE EQUILIBRIUM IN PRACTICE

presented by

Ruth Ann Rashid

has been accepted towards fulfillment
of the requirements for

M.A. _____ degree in Health and Humanities

Tom Tomlinson
Major professor

Date __May 7, 2002__

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MAKING ROOM FOR SPIRITUALITY IN ETHICAL DECISION-MAKING IN END
OF LIFE CARE: WIDE REFLECTIVE EQUILIBRIUM IN PRACTICE

By

Ruth Ann Rashid

A THESIS

Submitted to
Michigan State University
in partial fulfillment of the requirements
for the degree of

MASTER OF ARTS

Interdisciplinary Program in Health and Humanities

2002

ABSTRACT

MAKING ROOM FOR SPIRITUALITY IN ETHICAL DECISION-MAKING IN END
OF LIFE CARE: WIDE REFLECTIVE EQUILIBRIUM IN PRACTICE

By

Ruth Ann Rashid

The theory of wide reflective equilibrium (WRE) is a coherence theory of

morality, which holds much appeal because it seems to capture the method by which

many of us work toward making moral decisions in everyday life. By using this theory,

medical personnel and other relevant professionals, along with the patient and her family,

would be able to include the values of the patient in the decision-making process, thus

aiding them in making better decisions for patients at the end of life.

However, part of making good decisions for patients involves finding out what it

is that gives life meaning for that patient. In order to get at what it is that gives such

meaning to the life a patient, medical personnel could begin the conversation by asking

about the patient's spiritual convictions, values, and transcendental perspectives. As the

patient's views come to light, they can easily be incorporated into the process of WRE.

Not only is it necessary to have these kinds of discussions with patients, but having these

discussions and incorporating spirituality into the process of WRE can help to solve the

problem of justification and the problem of comprehensiveness which exist for WRE and

its use as a moral theory.

ACKNOWLEDGEMENTS

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INTRODUCTION

I recently conversed with someone about the various disciplines that can aid in understanding bioethics. This individual was of the persuasion that the only place for a graduate student to learn to understand bioethics is in a philosophy class. In my mind, there are two notions of 'understanding' at work here.

In one sense, to 'understand' means to learn a particular language – in this case, the language of bioethics. This is the kind of understanding that participation in a graduate philosophy course can provide. It is in the ethics class that we learn what it means to approach ethical dilemmas from the standpoint of the Kantian or utilitarian. It is in the philosophy of science class that we learn that, from the Kuhnian perspective, the field of bioethics makes no sense because one can only call the practice of medicine into question from within the practice itself, while from the Popperian perspective we see that bioethicists can help us to discover the Truth, which exists independently of a discipline. It is in a graduate seminar on narrative ethics that we learn that *stories* can help us to solve ethical dilemmas, both by providing additional information about the case at hand and by priming us for future dilemmas by seeing how other people's dilemmas have played out. Naturally, there is more to be learned from the advanced study of philosophy, but that discussion is not my focus.

Rather, my focus is on another sense of what it means to 'understand.' To 'understand' means to appropriately apply. In this context, it is more than speaking the language of the bioethicist; it is the meaningful application of that language to a particular case or situation. Understanding, in the way I have defined it, also necessitates developing and making use of a diversified "toolbox." The two tools that will be the focus for the rest of my exploration are spirituality and wide reflective equilibrium.

In what follows, I will first present a case in which it is evident that the patient is undergoing a "spiritual crisis." I will then provide explanations of wide reflective equilibrium and spirituality, respectively. Next, I will show some possible places that

spirituality fits into wide reflective equilibrium, while also providing possible solutions to some of the problems that wide reflective equilibrium encounters. Finally, I will refer back to the case presented at the beginning and demonstrate that through the process of wide reflective equilibrium and considerations of spirituality, a good decision can be made for a patient at the end of life.

CASE STUDY – A SPIRITUAL CRISIS

One of the possible origins of a spiritual crisis is a conflict between values that one has held for most of one's life and a particular situation in which one believes that holding to that previously held belief would result in making the wrong decision. Consider the following case.[1]

> An 87-year old woman is dying of congestive heart failure. Tests predict that she has less than a 50 percent chance to live for another six months. She is lucid, assertive, and terrified of death. She very much wants to live and therefore kept opting for rehospitalization and the most aggressive life-prolonging treatment available. That treatment has successfully prolonged her life for two years, though it has meant that she is becoming increasingly debilitated.

Given this view of the woman's life and her illness, the decisions to continue treatment seem to have been the right ones. This woman values her life and is afraid of death and therefore, just by the fact that she has lived two more years, it seems as though things have worked in her favor.

Now consider the following additional information.[2]

> All her life, this woman has put the needs of her daughter before her own. She prides herself on the fact that she was able to provide a good life for her daughter who is now 55 years old.

We might at this point decide that it's still in the best interest of the patient to have continued with treatment and hospitalization. Since the patient had given so much to her daughter, it seems as though something was due her. Perhaps we could consider it good

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[1] This case study is a modified version of the case study found on pg. 37 of John Hardwig's "Is there a duty to die?" Hastings Center Report 27, no. 2 (1997): 34-42.

[2] This information is a deviation from the case presented by Hardwig. Dr. Martin Benjamin suggested this variant.

that the patient is 'finally' doing something good for herself. We might even imagine that the patient's daughter is herself benefiting from having the extra time with her mother. Perhaps the patient is able to spend more time with her grandchildren. Maybe she has used the last two years to get her affairs in order to make things easier on her daughter. Maybe the patient's desire to prolong her life was in the best interest of not only herself, but her daughter as well.

But what if we include the following information about the situation that the patient's daughter is facing?[3]

> Her 55-year-old daughter was her only remaining family, her caregiver, and the main source of her financial support. The daughter duly cared for her mother. But before her mother died, her illness had cost the daughter all of her savings, her home, her job, her career.

Once this information is made known, the conflict that the patient was facing becomes clear. She had to decide if she should give into her fears about death and undergo every possible treatment, or continue to hold to her previous convictions regarding her sense of responsibility to her daughter. If the patient decides to forgo treatment, she must face her fears about death. If she seeks treatment, she will be putting her daughter in a financial position from which she will most likely never recover. In this lies the spiritual conflict.

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[3] These aspects of the case are included in Hardwig's presentation.

WIDE REFLECTIVE EQUILIBRIUM

In the case above the patient is faced with a situation that requires her choosing between two convictions that she holds. Before the time of the conflict, she was able to hold both of the convictions simultaneously, because they had never been challenged by each other. The two convictions, up until the point of conflict, were reconcilable. At the point of the conflict, the patient must decide which of the two convictions she wants to hold in the particular situation. The other conviction must be given up. Wide reflective equilibrium is a theory which systematized this process of deciding what to give up and what to continue to hold.

Wide reflective equilibrium is a coherence theory of morality. This means that it is striving for all components of moral theory to make sense in the light of one another. In wide reflective equilibrium, the relevant components are considered moral judgments, moral principles, and background beliefs and theories. Considered moral judgments are those decisions that we make that result from moral deliberation. They are not decisions made impulsively; rather, they are decisions that we spend at least some amount of time considering. Moral principles are action-guiding rules. Background beliefs and theories are those beliefs that we have held to over time. They can be based on our way of life or other more general beliefs that play a part in our personal moral deliberation. They are also memories of past experiences that play a role in guiding later action.

Norman Daniels describes the process of wide reflective equilibrium in the following way:

> We begin by collecting the person's initial moral judgments and filter them to include only those of which he is relatively confident and which have been made under conditions conducive to avoiding errors of judgment. For example, the person is calm and has had adequate information about cases being judged. We then propose alternative sets of moral principles that have varying degrees of "fit" with the moral judgments. We do *not* simply settle for the best fit of principles with judgments, however, which would give us only a *narrow* equilibrium.

Instead, we advance philosophical arguments intended to bring out the relative strengths and weaknesses of the alternative sets of principles (or competing moral conceptions). These arguments can be construed as inferences from some set of relevant background theories (I use the term loosely). Assume that some particular set of arguments wins and that the moral agent is persuaded that some set of principles is more acceptable than the others (and, perhaps, than the conception that might have emerged in narrow equilibrium). We can imagine the agent working back and forth, making adjustments to his considered judgments, his moral principles, and his background theories. In this way he arrives at an equilibrium point that consists of the ordered triple (a), (b), (c).[4]

Daniels's description of wide reflective equilibrium, although dense, does much to illustrate the interaction of the three components; considered judgments, moral principles, and considered moral judgments in wide reflective equilibrium. These components make up the ordered triple that he refers to as (a), (b), (c). In order for wide reflective equilibrium to be established, there must be coherence among the three components. In other words, all of the components must make sense in light of one another. According to Daniels, if there is no longer coherence among the relevant components, the moral agent must identify the incoherence and decide what to change among the components in order to reestablish coherence.

It can easily be argued that it is never possible for an individual to establish a true coherence among the components. Rather, the moral agent continually strives for coherence with the recognition that it will probably never be truly obtained. This argument is made because wide reflective equilibrium must be wide, meaning that it must be comprehensive as well as coherent. Because of the continual striving for increased comprehensiveness, coherence will most likely never occur. The moral agent must merely strive for coherence, not necessarily achieve it. If the moral agent is actively pursuing comprehensiveness, then coherence will become more difficult because there

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[4] Norman Daniels. " Wide reflective equilibrium and theory acceptance in ethics." As found in Justice and Justification: Reflective equilibrium in practice. New York: Cambridge University Press. 1996. pg. 22.

will be increasingly more information to put into the mix. The greater the comprehensiveness, the greater the amount of information and the more difficult it becomes for all of the information to be reconcilable. The question for the moral agent engaged in wide reflective equilibrium then becomes one of how much of a lack of coherence can be tolerated. (This issue of balance between coherence and comprehensiveness deserves more exploration, but the attempt to establish a position on this issue is beyond the scope of the relevant argument.)

In order to conceptualize wide reflective equilibrium, I have found it helpful to think of one's moral outlook as a network or web. In striving for coherence among the components, one must continually reflect on the network and make sure that all of the components maintain a nice fit. The practice is wide because it involves reflection on the whole of one's moral outlook in an attempt to find and maintain equilibrium.[5]

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[5] For additional information about wide reflective equilibrium, see John Rawls A Theory of Justice pg. 19-21 and 48-51 and Norman Daniels "Wide Reflective Equilibrium and Theory Acceptance in Ethics" as found in Justice and Justification, pg. 21-46.

SPIRITUALITY

In considering what it means to be spiritual, one of the most important pieces of information for us to keep in mind is that religion and spirituality are not the same. Religion is almost always defined as something institutional in nature. Religions are bound by tradition and have a history. There is a prescribed way of practicing a particular religion and to be a true believer, one must practice one's faith in that prescribed manner. Spirituality, on the other hand, is highly personal.

Common Conceptions

Many thinkers have tried to characterize what spirituality means. It is often defined as "wholeness," but I have also heard it explained as a personal quest to "exceed the limits."[6] Some say that all people can be considered spiritual because all people need to have a way to make sense out of life. In "Spirituality Described," Verna Carson Brenner makes reference to spirituality as a "way of life."[7] Jake Foglio makes a distinction between what he calls "religiously spiritual" and "secularly non-religiously spiritual" individuals in order to label the distinction between religion and spirituality.[8] Robert Wuthnow defines spirituality as a search. He notes that spirituality is no longer something that is inherited from our parents, but is rather something that we develop through the course of our lives. In this way, spirituality is no longer limited to affiliation with religious organizations. It is highly personal and is apt to be in flux throughout the

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[6] The concept of spirituality as meaning "exceeding the limits" comes from Father Jake Foglio, Catholic priest and retired professor. This statement was given in his lecture at the Second Annual Foglio Conference on Spirituality and Medicine at Michigan State University on October 6, 2000.

[7] Verna Carson Brenner. "Spirituality Described" Spiritual Dimensions of Nursing Practice. W.B. Saunders Co., 1989: 6-13.

[8] Jake Foglio. "Spirituality and Medicine," in "Spirituality: A Vital Component of Well Being." Coursepack for HM 548, Michigan State University College of Human Medicine, Spring 2001, 26-29.

course of a lifetime.[9] Spirituality involves more than just adherence to a particular set of religiously-derived moral mandates. It requires personal exploration and growth.

In this sense, spirituality helps us along in our journey of life. Spirituality may be as "simple" as our personal manifestation of organized religion, or it may be a complex web of beliefs, outlooks on life, and practices that come from many different religions. No matter where our spiritual *practices* come from, our spirituality can only come from within us.

Limiting 'Spirituality'

As is evident in the above characterizations of spirituality, many thinkers have attempted to conceptualize spirituality so broadly that it then comes to lack characterization.[10] When spirituality is defined in such a way that everyone is then said to be a spiritual person, the conception not only lacks meaning, but also moral weight. If everyone is said to be spiritual, it becomes somewhat mundane (pardon the pun) to inquire about whether or not someone identifies herself as being a spiritual person. Therefore, if spirituality is to be something that is really worth considering, some limits need to be placed on its conception and formulation.

In order for spirituality to do the kind of moral work that I will be discussing later on, I have chosen to define it in much the same way as Robert Wuthnow. As stated above, Wuthnow views spirituality as an ongoing search. It is something that involves personal exploration and growth. It is a dynamic process of seeking answers and insight. There are three characteristics that I believe must play a role in this searching for it to be considered spiritual. Spiritual seeking must be *personal* and *intentional* and while an

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[9] Robert Wuthnow. After Heaven: Spirituality in America Since the 1950's. University of California Press, Berkley. 1998. Chapter 1.

[10] This concern was raised by Dr. Tom Tomlinson upon his review of an early draft of this exploration.

individual is engaged in the search, the individual maintain epistemic humility[11] about her beliefs. These three characteristics of spirituality require explanation.

In order for this kind of searching to be spiritual, it must be personal. That means that it must focus on the beliefs of the person who is doing the seeking. Therefore, the questions are not "What does my religion teach me?" or "What do my friends and family believe?" Rather, the individual must be focused on what it is that creates meaning in her life. She must be considering her beliefs. She might ask herself, for example, "What tenets of my religion are important for me to incorporate in my life?" or "What have I learned from family and friends that has helped me to become a better person?" In this way, the focus of the searching must be the individual who is doing the searching. The spiritual person is engaged in a process of self-discovery and reflection.

The searching must also be intentional. In order for a search to be spiritual, the individual must recognize that she is searching. This means that she must realize the process that she is undertaking. She must want to be engaged in the searching and must take the necessary time for reflection and contemplation. For example, if a person takes a yoga class in order to become more physically flexible, that is not a spiritual activity. But, if the same person takes the class because of her belief that it will enhance her spiritual wellness, then it is a spiritual activity if she enters the class treating it as such.

Finally, the individual must maintain epistemic humility in relation to the results of her spiritual search. She cannot dogmatically hold to beliefs and practices because spiritual searching is an ongoing process. In the conception I have formulated for the purposes of this exploration, spirituality does not have an endpoint at which the individual can sit back and believe that she has found all of the answers to life's questions.[12] The individual may believe (though this is probably highly unlikely) that at

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[11] The term "epistemic humility" was suggested by Clayton Thomason.

[12] I recognize that death, illness, and loss of mental ability may serve as a kind of end point for the spiritual searches of some people, but that is not relevant here.

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some point in time everything has become clear to her and all of the aspects of her life make sense in the light of one another. Although this may happen, the individual cannot just sit back and relax as a result of this newfound clarity. Rather, she must keep working to test and try out her beliefs and the other products of her spiritual search.

Even though the spiritual person might believe that there is an eventual endpoint to her spiritual journey, most would probably realize that they will never see the endpoint (at least while inhabiting their "earthly bodies"). For the spiritual person, the journey is just as important as the destination. The struggles and difficulties of life are part of what's important to the spiritual person because it is through these struggles that the individual is able to see more clearly what it is about life that gives it meaning.

Not only does spirituality not necessarily involve adherence to a particular religion, but it also cannot involve the kind of strict dogmatic adherence to a set of beliefs and rules that religious affiliation comes to mean for many religious people. People who blindly follow the mandates of a religion already believe that they have all of the answers to life's questions. They believe about life (and life ever after) whatever it is that their religion tells them to believe. They do not seek answers, because they believe that they have already received all of the answers from their religion. Because these people are not actively seeking insight and answers, they cannot be considered spiritual. The fact that one can be religious and not be spiritual is just one more way that religion and spirituality are not the same.

On the other side, people can be spiritual without being religious. Individuals can seek insight and answers to transcendental questions without identifying with any particular religion. Spiritual people can glean information and spiritual practices from a variety of religions without ascribing to one religion in particular. Or their spirituality can be entirely personal, a derivative of non-religious influences. For example, a person

can hold to the Socratic belief that the unexamined life is a life not worth living.[13] This individual would spend time considering what it is about her life that gives it value. She would think about the decisions that she makes and try to have them fit in with the way that she has lived her life up to that point. The 'examined life' will be discussed again when the case study presented at the outset of this exploration is reconsidered.

Spirituality in Practice

Because of the highly personalized nature of spirituality, it is vital that medical professionals ask their patients about their beliefs and practices. There is no other way to find out what beliefs a patient holds about "the other." Even though not all people identify themselves as being spiritual, if they find themselves in the hospital, most people want (or at least would not mind) being questioned about their spiritual convictions, values, and transcendental perspectives.

A survey was recently conducted of patients, which showed that sixteen percent of patients did *not* want to be asked about their religion or spirituality while in the hospital. This number may initially be disconcerting, but there is another interesting trend that was discovered through conducting this survey. The results of the survey showed that *more* than sixteen percent of the patients in this study stated that they were not religious.[14] Because we do not know the overlap of the categories based on the presentation of the data, it is difficult to make strong conclusions. What is interesting to note, though, is that some believe that this shows that even individuals who do not classify themselves as religious still want medical personnel to inquire about their personal beliefs. Although I have not been able to find empirical evidence to prove it, I

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[13] Socrates states that "the life which is unexamined is not worth living" in "Apology." At the time that Socrates makes this statement, he is facing his own death, which makes his statement even more meaningful in the context of this thesis.

[14] These statistics come from Dr. David Hufford's keynote address at the Second Annual Foglio Conference on Spirituality and Medicine at Michigan State University on October 6, 2000.

believe that the same could be said of spirituality. I believe that even though some people may not identify themselves as being spiritual, that at least some people would still want to be asked about their spiritual convictions, values, and transcendental perspectives if faced with an illness or other condition which required their admission into a hospital. There is reason to believe that even if they did not want to be asked such things, that they would tolerate this questioning. (Although it may seem as though any questioning would be of benefit to the patient, that is not necessarily the case. I will address this issue below, when the theory is discussed in practice.)

This kind of questioning and dialogue is even more important when it is considered that it is not uncommon to have a bedside conversion or to fall back on a particular set of beliefs that the patient dismissed long ago. Spirituality has the potential to be a cohesive force in a personal narrative. For the spiritual person, her sense of herself in the cosmos, the manner of her interaction with others, and her view of herself as an individual may only be able to be understood through gaining insight into her spirituality. By ignoring her spiritual convictions, values, and transcendental perspectives, a vital component of who she is (and potentially her entire essence) is also being ignored.

"Markers" are not Enough

As has been previously described, religion and spirituality are not the same and spirituality is highly personal in nature. Therefore, when trying to gain access to and understanding of the spiritual beliefs of a particular patient, it is not enough to have looked at the medical chart of a patient to see that upon his admission to the hospital, he checked the box on the form that signified he is Muslim. Just knowing that he has given himself the identity marker of 'Muslim' does not help us to decide how to treat him. Instead, those involved in the decision-making process need to take the information that he is a Muslim and combine it with what is known about Islam. Then, we need to talk to

the patient. We need to find out from the patient *himself* what it means for him to be Muslim. It is only through dialogue with the patient that we would be able to see how much it means to him to participate in particular religious practices. We also need to talk with the patient to learn if his kind of Islam – his spirituality – is different from the common conception that we hold of Islam. We cannot extend our generalizations about the desires, motivations, and feelings of all Muslims to this particular Muslim before us, because faith holds different meaning for different individuals – even for individuals who claim the same religious faith. We have to consider that this man, who when called upon to fill in a checkbox chose that of Muslim, is a spiritual person who has relevant personal convictions.

Identity markers, particularly those assigned by the patient himself can help us to determine how to begin a conversation with a patient about his or her beliefs. For example, we can begin by asking the patient what being Muslim means to him. In a utopian situation, decisions about patient care would only be made after participation in this sort of meaningful conversation. In reality, time and resources are limited, making it difficult for medical personnel to have the time adequately address these issues with the patients in their care. Resource allocation and the amount of time spent with patients are topics which are beyond the scope of this paper. However, I remain unwavering in my conviction that conversations with patients (or their loved ones if the patient is unable to communicate) is absolutely necessary in order for appropriate decisions to be made for a patient at the end of life. It is up to hospital administrators and individual hospital employees to determine methods by which to ensure that the necessary amount of time is allotted for these conversations.

Spiritual Change when Faced with Death and the Importance of Conversation

Another reason that we cannot rely totally on markers is that some markers do not develop until the patient is forced to face his or her own mortality. A particular patient

may have filled out an admissions questionnaire without naming a next of kin or checking the box next to a religion. After being admitted to the hospital, the patient may face a terminal illness. In thinking about his or her life, the patient may become remorseful at a failed relationship with his or her adult child. In thinking about death, the patient may begin to cling to beliefs that he or she held as a child growing up in a particular faith tradition or the individual may not find the comfort in religion that he or she once found. The patient may begin to develop a personal spirituality, because he or she begins to question his or her religion and make changes to his or her personal beliefs in light of the life changes that he or she is experiencing. As stated above, spirituality is dynamic. Without conversation with the patient, no one would ever know that there might be aspects of this person's life that needed to be resolved before there is possibility of a peaceful death.

It is not uncommon for individuals to cling to the faith that they formerly held once they find themselves "living in the light of death."[15] It is difficult for many people to face death with the thought that there is nothing waiting for them on the "other side." In many ways, the deathbed is the perfect place for the kinds of self-reflection and transformation that spirituality inspires. It is the last chance that the individual has to right former wrongs. It is the last opportunity for reconciliation. If while contemplating her own mortality, the patient comes to realize that there are aspects of her life that she wants to change, that is the beginning of a spiritual search. She begins her search by recognizing that she has made mistakes. She then tries to identify some of those mistakes and determine whether or not there is anything that can be done to correct them. Finally, she puts her spiritual realization into practice by working to right whatever wrongs she is able. She tries to re-ally herself with the cosmos by striving to be the person that she has at times failed to be.

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[15] In concept of "living in the light of death" comes from one of the patients who was a focus of one of episodes of the Bill Moyers series on PBS entitled *On Our Own Terms: Moyers on Dying*.

Patients should be allowed and encouraged to be engaged in a process of fundamental divergence from their life up to the time of their admission to the hospital. Because those involved in end of life decision-making should be allowing for this kind of radical transformation, they need to be constantly involved in conversation with the patient to know where he or she is going to go next. We need to help them along with their final journey and help them to make decisions about their end of life care based on who they are *now*, not just who they were before. Although the past is part of who the patient is now, there are morally relevant differences between a person who is healthy and a person who is not. These differences need to be taken seriously if we are to work at doing the best that we can for patients in the final stages of life. Patients need to be able to continue their spiritual journey until they draw their last breath. Room needs to be made for patients to continue to develop their spiritual convictions, values, and transcendental perspectives as long as they are able. To assume that patients confronting the end of their life will be unwaveringly at peace with themselves, their spiritual convictions, values, and transcendental perspectives, would be a horrible mistake. Patients need to be allowed to outgrow previous identity markers and take up new ones. They need to be given the room to continue to question.[16]

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[16] At no point do I wish to say that *all* patients will undergo a deathbed conversion. In fact, many patients probably remain basically the same people that they were before they entered the hospital.

MAKING ROOM

According to Daniels's description of the ordered triple, there is room for spirituality both as part of the body of moral principles and as part of the agent's background beliefs and theories. Both of these components, in turn, impact the considered moral judgments that are made by the agent.

Many spiritual people hold to a set of moral principles. These principles may come from the teachings of the particular religion to which the agent ascribes, or they may come from the agent's conception of natural order, which are a part of the worldview of the agent. For example, the agent may hold that it is wrong to kill another person for gratuitous reasons. This principle may come from sacred texts, from a conception of the sanctity of life, or from a utilitarian way of making sense of world. This utilitarian ethic comes out of the realization that civilized society cannot persist if members of society go around killing each other. The aggregate utility of society will be hindered if members of society cannot leave their own home without trusting that they will not be killed on their doorstep. The principles such as "do not kill" that are held by the spiritual moral agent help to guide the agent's decision-making processes.

Also, the background beliefs and theories as described by Daniels are impacted by his or her spirituality. As stated earlier, background beliefs and theories are influenced by the worldview of the agent. This kind of worldview can be formed through the process of spiritual seeking. In actively searching for answers to life's questions, the spiritual person forms beliefs about herself and her place in the world which are relevant kinds of background beliefs and theories.

PROBLEMS WITH WIDE REFLECTIVE EQUILIBRIUM AND SOME POSSIBLE SPIRITUAL SOLUTIONS

In thinking more closely about wide reflective equilibrium, there seem to be two major problems with its implementation as a moral practice. The first problem is one that I have previously alluded to. Wide reflective equilibrium places value on comprehensiveness, but does not indicate how far one must go to achieve this comprehensiveness. The second problem is that wide reflective equilibrium, as a practice, does not help one to determine what course of action to take. In making a moral decision, wide reflective equilibrium does not give any indication of why one equilibria should be chosen over another. In what follows, I will address both of these concerns in turn.

The Problem of Comprehensiveness

Given that experience is necessary for engagement in wide reflective equilibrium, the question of how one can adequately engage in wide reflective equilibrium becomes one of width. By width, I mean that there is a range of possibility when it comes to how far we need to push ourselves to test our moral outlook in wide reflective equilibrium. As I see it, there are two extremes to this range. I call these extremes the moral hermit and the moral chameleon.[17] It is my belief that neither of these extremes is the way to go and that neither gets you to the kind of comprehensiveness that wide reflective equilibrium requires. The concepts of the moral hermit and the moral chameleon require explanation.

The moral hermit is someone who has a moral outlook that basically goes unchanged over time. This individual lives a life that reaffirms his moral system. He

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[17] By describing these two extremes, I am not arguing that there are actually people in the world that live and function at these extremes. I am just arguing that these extremes are the farthest that I believe people could go with regard to the role of experience in wide reflective equilibrium.

surrounds himself with like-minded people who do not call his moral system into question. His life is rather dull. He is not open to new experiences because he is content with his life the way that it is. He may be a morally commendable person and make decisions that we all consider to be morally right, but he is not the kind of guy that most of us would want to have dinner with, because his experiences are very limited. His moral system is so static that it defines who he is and any change to his system would (in his view) compromise his identity. Therefore, he is better off not changing his moral system because, in his view, he would be compromising himself and his identity.[18]

At the other end of the spectrum is the moral chameleon. This is someone who is constantly trying to experience new things and to push herself to try and see situations from new perspectives. She hops from community to community, each time taking on the values and moral system of that community. She is a traveler and leads what many would consider to be an exciting life. She is someone that we would love to talk with, but we fear letting her get to close to our children, because we never know what she might be saying or doing next. She has no solid personal identity, because she adapts herself to her surroundings and tries to fit in. Her moral perspective is constantly in flux and there is no real continuity to her life story.

Obviously, neither of these extremes will get us to the goal of wide reflective equilibrium. There has to be some middle ground. To establish this middle ground, I now go back to the two points raised at the start of this section. First, in order to engage in wide reflective equilibrium, we must be active in testing our moral system. We must be open to new experience. The moral hermit totally isolates himself from experiences

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[18] It might be argued that a moral hermit would not, in fact, be able to engage in wide reflective equilibrium. However, I believe that the moral hermit could actually engage in moral reflection because of new insight gained. The moral hermit might "accidentally" experience something that is new to him, thus causing him to reflect on his moral system. The difference, though, is that the moral hermit would probably be less likely to make changes in his considered judgments, moral principles, and background beliefs and theories, because he believes that he will never have the same sort of "accidental" experience again and therefore need not change his moral system. Thus, even after reflection, the moral hermit would maintain the same moral system.

that he thinks will lead him to have to refine his moral system. He is like the scientist who does not test her hypotheses out of a fear of being wrong. The moral hermit is not engaging in wide reflective equilibrium in the proper way, if he can be said to be engaging in it at all.

Secondly, it is my belief that engagement in wide reflective equilibrium requires that we have novel experiences, but not too many. Also, the novel experiences need to occur at great enough temporal intervals that we are able to do the moral work that wide reflective equilibrium requires. We have to be able integrate the information that we have learned from the novel experiences with our considered judgements, background beliefs and theories, and moral principles. This kind of reflection takes time. The moral chameleon does not allow herself the time to digest what her experiences mean with regard to her moral framework. Because of her constant pushing to experience all that she can and to live life to the fullest, she has lost herself and has no sense of personal identity. She is not allowing herself to engage in wide reflective equilibrium because she is not taking the time for reflection that it requires.

There is obviously a large middle ground between these two perspectives. In order to discuss where exactly in this middle ground I believe that experiences should fall in wide reflective equilibrium, I will begin by stating where is should not fall. Some people are of the opinion that all that we need to do in order to engage in wide reflective equilibrium is to be open to new experiences that have the potential to create conflict within our moral system.[19] From this openness, conflict may arise, or it may not. All that matters is that we are open to reflecting on and possibly revising portions of our moral system.

I do not believe that this position takes the role of testing through experience far enough. We have to do more work than just being open to potential conflict. This

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[19] This view was articulated by Sonya Charles, philosophy doctoral candidate, Michigan State University.

position is too close to the moral hermit. Recall that even though the moral hermit in many ways lives a life of isolation in which he just about guarantees that he will not have to revise his moral perspective. Although he has not shut himself off totally from the possibility that he will "accidentally" encounter something that will lead him to reflect on his moral perspective, he has put erected a psychological barrier against the experience of conflict or challenge.[20] Therefore, even though the hermit might accidentally come into contact with something that poses a challenge to his worldview, he will not undergo the self-reflection that is required to make sense of it. He has the experience, but does not take the next step. The individual who lives a more normal life with the same kind of openness to experience is not much better off.

In order to truly engage in wide reflective equilibrium, we need to do more than wait around for a reason to reflect. We need to talk with those who hold different positions from our own. We need to see how other people live and work and raise their children. We need to move beyond our circle of like-minded friends. This is not to say that we need to constantly be forcing ourselves to change our moral perspective. We cannot go as far as the moral chameleon and still maintain our sense of identity. Instead, we need to have a strong sense of identity if we are going to be able to hold on to anything that we learn during our moral testing. If we do not know our own identity well enough, we will not be able to have a coherent life story. Even though our life story may include detours and backtracking, our sense of identity is what creates the coherent whole. It is what binds our life story together. Without a sense of identity, we cannot make sense of new experiences in a way that allows the new experiences to become a part and remain a part of our life story. Without knowing who we are, we cannot decide if something in our moral perspective needs to be refined or replaced. We need to know

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[20] This concept of a "psycholigical barrier" was articulated by Dr. Tom Tomlinson.

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who we are and what we stand for before we can rationally change what we are as a moral agent.

All of this said, it is clear that we need to do more in our quest for wide reflective equilibrium than just be open to new experiences that are potential sources of moral conflict. However, I have not made clear how far we need to go to seek out these experiences. This is because how far we need to go is variable based on both the limits of the individual and the intensity of the experience. First of all, by focusing on the individual, we know that one cannot push oneself farther than the limits of reflection will allow. What I mean by this is that one cannot experience more than one can make sense of with respect to the whole of one's moral system. As stated above, it takes time to engage in the reflection demanded by wide reflective equilibrium. The reflection calls us to find coherence among our background beliefs and theories, moral principles, and considered judgments. This is not something that can be done quickly and easily. Just being able to identify and articulate our background beliefs and theories, moral principle, and considered judgments takes time.[21] The amount of time necessary for reflection will vary from individual to individual and therefore cannot be marked as a fixed point.

Secondly, the kinds of experiences we have are going to play a role in how much work we need to do to test our moral perspective. For example, if we have an experience that is unlike anything we have ever experienced before, it might take a lot longer to make sense of and incorporate than something that is fairly similar to previous experience. If we have an experience that shakes us at the core, like holding our dying child in our arms, it may take a long time for us to regain some level of coherence in our moral perspective. This experience may call into question our belief about a just God our the belief that in the natural order of things, children outlive their parents. The

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[21] This is not to say that every time we engage in wide reflective equilibrium that we have to name all of our considered judgments, moral principles, and background beliefs and theories. But it will take a lot of time just to figure out which of these considered judgments, moral principles, and background beliefs and theories are affected by the new information gained by a particular experience.

experience of losing your own child would call either or both of these beliefs into question, which would then create a ripple effect throughout our moral network. If we begin to question whether or not our god is just, we may then question all of the spiritual convictions that we hold. This questioning will take a lot of time. This demonstrates that the intensity of experience is another consideration in how far we need to go to seek out new experiences. Some of the most intense experiences are probably ones that we do not seek out. Even if we are trying to challenge ourselves and test our moral perspective, we might not want to witness a murder or the atrocities of war. But, once we have an experience like this, we have to make room for it in our moral perspective.

Further, I believe that spirituality, including the ideal of leading an examined life, can play a role here. Recall that spirituality requires an active seeking for answers and insight that is personal, intentional, and epistemically humble. While one is searching for answers and insights, one can also be seeking out new kinds of experiences which may pose a challenge to components of one's moral web. In this way, those who are engaged in spiritual pursuits do not fall into the category of a moral hermit. It seems to me that the moral hermit can be viewed in much the same light as the blind-sighted adherent to a particular religion. Neither is engaged in the kinds of searching necessary for wide reflective equilibrium or for spirituality, because neither are epistemically humble in relation to their beliefs.

Also, the spiritual person cannot be a moral chameleon. In order to really be engaging in spiritual exploration, one must be reflective. As part of one's spiritual exploration, one must actively contemplate one's spiritual perspective, values, and considerations of the transcendent. This kind of personal reflection requires time, which the moral chameleon would not have to devote to such consideration out of her constant striving to have new and divergent experiences. The moral chameleon just wants to have as many different experiences as possible, which does not leave her with much time to work to incorporate anything new into her moral network.

If one is engaged in the kind of seeking that my formulation of spirituality requires, one will be in the middle ground described earlier in this section. The spiritual person will be searching for answers, many of which will come through experience. It is hard to imagine many instances where an answer is bestowed upon an individual without there being an experiential precursor which inspired the "discovery" of that answer. Much of what we learn about the world and about ourselves comes from experience and there is no reason to believe that what we incorporate into our spiritual life will derive any differently.

The Problem of Justification

The second problem with wide reflective equilibrium is that it does not help us to decide between competing equilibria when it is necessary that we do so. When we are in disequilibria, wide reflective equilibrium only guides us by informing us that there is a choice to be made and than leaves it to us to make that choice. It does not help us to determine which of the competing equilibria we would be better off adopting, the theory just seems to assume that the proper choice will become apparent. However, if we are choosing between discarding one piece of our moral network over another, it may not be an easy choice. Both pieces must be of some value to us, otherwise they would not be part of the network. It seems as though more guidance would be helpful in these decisions.

Some guidance may come from our spirituality. A body of literature which is particularly helpful here is that of pastoral care and counseling. Many people who seek pastoral care and counseling are facing a difficult time in their life and many of them have to make some kind of decision. Lawrence Kohlberg has identified six stages of moral reasoning and decision-making which I believe have some import here. According to his stages:

...right is determined by: (1) obedience to authority to avoid punishment and gain rewards; (2) instrumental hedonism (what satisfies one's needs) and some reciprocal fairness; (3) conformity to social expectations to gain approval; (4) obeying rules and respecting authority (the law and order stage); (5) respecting universal ethical principles; and (6) responding to one's inner vision of justice, love, and respect for all persons.[22]

According to this formulation, those with a sense of spirituality would be functioning (for the most part) at level six. This is because the spiritual person would have developed the "inner vision" which is necessary for functioning at this level. If an individual is spiritual, she would be able to judge right and wrong from this higher level because so much of her view of the world and her place in it would be able to be articulated. Because she had spent time working out her inner vision of justice, reflecting on what it means for her to love and to be loved by others, and learning what it means to be in relationships based on respect, she will be able to use these formulations as tools for decision-making. It will make sense for her to work to base decisions on these formulations because she has spent so much time and effort developing these formulations.

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[22] Howard Clinbell. Basic Types of Pastoral Care and Counseling: Resources for the Ministry of Healing and Growth. Abingdon Press: Nashville. 1984.

POSSIBLE OBJECTIONS

One objection to the argument that I am attempting to make regarding the place of spirituality within wide reflective equilibrium is that the former is an ethical theory and the latter is a meta-ethical theory. This could be said on the grounds that spirituality, in many cases (though certainly not necessarily), involves adherence to rules of a particular religion or belief system. By this line of argument, spirituality would be a method for moral decision-making via adherence to a set of rules, principles, and guidelines. Wide reflective equilibrium, on the other hand, is a coherence theory of morality, which (as previously discussed) does not tell us much about how to make decisions. For this reason, a comparison between spirituality and wide reflective equilibrium would not be possible, because they are practiced on different levels.

In addition, spirituality, when rooted in a particular religion, requires (in many cases) a strict adherence to a set of rules that therefore places those rules in a privileged position. Wide reflective equilibrium, however, requires that no part of the moral agent's network be privileged. Therefore, the spiritual person could not be engaged in true wide reflective equilibrium.

Another possible objection that could be raised against my argument is that spirituality should not be considered in the medical context because it is so highly personal in nature. If people have the right to believe whatever it is that they want to believe, then it seems problematic to use the information about the beliefs of individual patients to serve as justification for actions that medical personnel take in particular cases. This is of even greater concern when the actions that are taken go against the standard of care that is usually practiced. By using the personal beliefs of a patient as justification for the actions taken with regard to that patient, we are just creating a system of medical care in which anything goes. Further, if we allow spiritual considerations to be a guiding force in decisions about end of life care, then we have no way by which to make decisions for those patients who claim to not have spiritual convictions.

RESPONSES

I believe the first objection is rooted in an unfortunate perspective of what it means to be a spiritual person. As stated earlier, spirituality is not limited to religion. Moreover, if one chooses to call herself a member of a particular religious group, it does not mean that she is a limiting herself to being a rule follower. She is not committing herself to blindly following the rules of a particular religion, rather she makes decisions to follow or to not follow those rules based on her spiritual convictions, values, and transcendental perspectives, in conjunction with her conception of her own identity. To say that she is merely following rules is to accuse her of being a moral infant who has not morally progressed beyond her Sunday school lessons.

The spiritual enterprise, instead, should be considered a meta-ethical theory much like the enterprise of wide reflective equilibrium. This is because one's sense of spirituality will help one to determine which rules and principles to adopt, how to make considered judgments, and how to treat others justly. That sounds remarkably like what wide reflective equilibrium is helping us to do! However, spirituality goes a step further, by giving us insight into how we should make particular decisions. People are able to incorporate their sense of spirituality into their continual quest for a comprehensive and coherent moral network.

In response to the second objection, I would begin by saying that even if a patient does not consider himself be to spiritual, he still places value on some things over others. In this way, even if the patient is not spiritual, his care still needs to be discussed with him so that decisions can be made for him in accordance with what he values in his life. There is no reason that those values need be spiritual in nature. For example, he may value his autonomy and personal freedom above all else. If this is the case, then the medical personnel involved in his care should work with him so that he can be placed in a facility that will allow him live in his own apartment and to cook his own meals if he desires. The medical personnel need to work with the patient as much as possible to help

him to demonstrate that he is able to take care of himself and therefore is well suited for an assisted-living facility, rather than a nursing home.

Further, even though everyone may not be spiritual, there is evidence that the vast majority of people are. But all statistics aside, even if only a minority of people consider themselves to be spiritual, those people still need consideration. At minimum, medical personnel need to recognize that there is something invisible out there that needs to be considered. There is a dimension to some people's lives that is highly personal and intimate, but that helps to make them who they are. By not considering the spiritual convictions, values, and transcendental perspectives of people who care about such things, medical personnel would be neglecting an essential part of who those people are. Patients simply cannot receive optimal treatment if what it is that is important to them is ignored. Therefore, it must be considered when helping patients to make decisions about their end of life care.

THE THEORY IN PRACTICE

In thinking about what it means to incorporate wide reflective equilibrium and spirituality in end of life decision-making, it is useful to reconsider the case presented at the beginning of this paper. Recall that an 87-year-old woman, at some point in her medical treatment, was faced with the decision to give into her fear of death and continue treatment, or continue to put the best interest of her 55-year-old daughter before her own and stop treatment, thus giving her freedom from the burden of being her mother's caregiver. In this situation, the patient had to give up one of the two convictions that she had held to that point without a conflict.

In considering the role of the medical personnel in helping this woman to come to a decision about the continuation or termination of her treatment, it is useful to first consider the way that the woman could be helped by using wide reflective equilibrium. In relaying information about treatment and non-treatment options to the patient, the medical personnel could have asked the woman to identify reasons for continuing treatment and reasons for stopping treatment. Through this discussion and analysis (and perhaps through conversation with the daughter) it should have become apparent to the medical personnel that the woman was torn between her two convictions. The medical personnel could then work to help the woman to make a decision between the two convictions and therefore make a decision about the termination or continuation of her treatment.

In helping the woman to make a decision about her treatment, medical personnel can ask the woman to consider hypothetical situations in which she would have to face the same kind of conflict. For example, the woman could be asked to consider a situation in which she would be put in a position to have to sacrifice her life to spare her daughter's life. In this case, the woman would probably say that she would have overcome her fear of death to save the life of her daughter. She would have been able to

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overcome this fear because she would have placed the value of the life of her daughter above the value of her own life.

After thinking about this kind of hypothetical situation (and possibly others) medical personnel could ask the woman about her spiritual convictions and transcendental values. She could be asked what she believed God, or the cosmos, would want her to do. She could be encouraged to medicate, pray, or reflect upon the weighing of the conflicting convictions. At no point should the medical personnel tell the woman which decision to make. Rather, they should make themselves available to speak with her as much as she would like and to provide her with any information about her treatment options which would help in her decision-making process.

There are, of course, ways that the conversation can go wrong. Just having a conversation with a patient is not enough, because the content of the conversation and the manner in which the conversation is approached matters. There are ways that conversation can make things worse for the patient. Medical personnel must be sensitive to the needs of the patient and not force the patient to discuss issues that she is not ready to discuss. The conversation must be directed by the patient, with the medical personnel being sensitive to what the patient is comfortable discussing. The patient cannot be forced into conversation. There is much that can be said about the ways that medical personnel should approach and carry out conversation with patients and their families, but that discussion is beyond the scope of this exploration. It is, however, important to keep in mind that not all conversation will be of benefit to the patient.

Ultimately, treatment decisions are in the hands of the patient. No matter what she decides to do, the medical personnel involved in her care can feel good about the fact that whatever decision she ultimately arrives at is one that came through careful consideration. By giving the patient the necessary amount of time to make a good decision and by remaining available to help her when necessary, the medical personnel can rest assured that the decision that was made was in the best interest of the patient.

CONCLUSION

It has been my goal to demonstrate that spirituality has a place in wide reflective equilibrium. Moreover, I believe that I have shown that they may in fact be the same in some respects. Both are tools for acting as moral agents, but they also help us to have and develop an identity. Both address conflicts and are able to progress because of decisions made about those conflicts. Both seek unity. Both require work on the part of the individual. Most of all, spirituality and wide reflective equilibrium help us to live and function as moral agents in an increasingly complex and plural society.

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