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ETHICS, PSYCHIATRY, POLITICS - HOMO MORALIS

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SUMMARY

In this paper we see the personality of man through his comprehension as a moral entity. An entity that emerges, thinks morally and/or behaves morally, inseparable from the society in which he lives as a moral being, and by its moral thinking and/or behaviour further defines the morals of the whole society. Accordingly, we present (post)modern society as a society of tolerance of value ambiguity. In that kind of society we perceive medical situation as moral situation and define the role of medical ethics in the field of biomedicine. In that kind of society politics is perceived as one of the social spheres where different varieties of systems of values of individuals or groups are publicly embraced, touched, or terribly unhappily pursued... all in the name of understanding man and his world. In order to prevent the victory of Thanatos, who prevails in the contemporary concept of politics and in postmodern global society, we suggest implementing applied bioethics as a form of metapolitics as an answer. We explain the idea of bioethics and suggest bioethical education as the operationalisation of metapolitics through bioethics as orientation knowledge, in both medicine and politics.

Key words: *medical ethics - integrative bioethics – metapolitics - bioethical education*

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INTRODUCTION

Personality of the individual is a unique phenomenon in the living world. And human behavior can be seen as an endless universe of varieties. (Šaula 2007) Although personality is a constant topic of concern for physicians, psychologists, theologians, philosophers, anthropologists... we are of the opinion that there is still no danger of anyone fully explaining human personality in this century. We join the belief that eclecticism has prevailed, as practitioners have found that each of the respectable systems that define personality can contribute “a bit” to its understanding (Hrnjica 2007). In view of all of that and understanding that differences in comprehending human nature are largely the result of differences in comprehending the importance of particular determinants in its emergence, especially acknowledging that it deems impossible without understanding the environment in which the individual fulfills his most important needs.

In this presentation we see the personality of man through his comprehension as a moral entity. An entity that emerges, thinks morally and/or behaves morally, being inseparable from the society in which he lives as a moral being. And by its (a)moral thinking and/or behaviour it defines the morals of the whole society.

Accordingly, unlike a community characterised by the absence of critical questioning of heteronomous values and norms, in our work we present our view of (post)-modern society, as one at the extreme opposite point of departure of the moral pendulum, as a society of tolerance of value ambiguity.

HOMO MORALIS AND MEDICAL ETHICS IN A SOCIETY OF TOLERANCE OF VALUE AMBIGUITY

Although it is acceptable for us to see *morality* as a set of values and norms concerning good and evil and right and wrong, and group and individual attitudes about it (Turza 2009), we point out that numerous definitions of morality are very different. (Čović 2000, Kanrga 2004, Stojanović 2006) But what we note is that each of them implies the existence of a *moral situation* as a precondition and a provocateur for reflecting and assessing the morals of the individual. And as the moral situation concerns interpersonal relations and the relationship of the individual to society (Marić 2004), it is also clear that morality cannot exist outside the personality, nor outside society.

Freud contributed to understanding of morality by claiming that the function subject to censorship acts unconsciously (Freud 2006). And even in the age we live in, there is an insight that the field of the unconscious is what makes a significant difference between the phenomenon of morality and moral consciousness. As Turza points out, moral awareness refers only to the conscious attitude of individuals and groups towards moral values, norms and moral attitudes. (Turza 2009) This should mean that, as a moral entity, one should be aware of the moral aspect that separates every other from the moral situation, and opt for and apply a certain moral principle, moral value. Mature moral reasoning is guided by generally accepted humane moral values, and

less mature to a greater or lesser extent deviates from them. In drastic cases, expressed through antisocial forms of thinking, humane moral principles are grossly violated in value commitments, as are legal regulations through antisocial forms of behaviour.

Morality was also understood as one of the psychological functions, moral reasoning and moral behaviour were brought into a positive relationship, and moral behaviour was defined as “free, independent, self-sufficient, self-assessed, and self-directed activity of the will that realises the moral evaluation of good or evil in external actions” (Maric 2004). This emphasised the importance of the will to develop morality. While Piaget and Kohlberg explain that the development of individual moral consciousness and morality begins with early child amorality (*tabula rasa*) (Piaget 1932, Kohlberg 1983), they point out that “moral behaviour is about moral reasoning” as well, but that for building and development of morality the crucial is development of the cognitive potential of the individual (Piaget 1965, Kohlberg 1984, Colby & Kohlberg 1987, Gibbs 1991). Studies in the domain of intelligence-personality relations have indicated a stable low negative correlation between some modalities of amorality (passive-sadistic) and all measures of intelligence, and the direction of influence always moving from the space of personality to the space of intelligence (Knežević 2003).

Many morality researchers have clearly emphasised the thinking-behaviour dichotomy in this context. Behaviourists allow the possibility of existence of an internal disposition affecting manifest human *behaviour*, written in the being by some of the learning mechanisms, which is through the results of the undertaken research shown predominantly by the function of social learning (Dreman 1976).

Hoffman’s concept of empathy crucially explains and understands the phenomenon of a person’s *moral behaviour*, arguing that an empathic affect can contribute to a person’s attachment to a moral norm, thereby providing him with an affective base (Hoffman 1991). Also, a valuable synthesis of the concept of empathy interpreted in bioethical key is present in the book *Bioethical Sensibility*, written by the Ivana Zagorac (2017).

And just like evil is the “starting point” of every ethic (Kangrga 2004), the opinion that people are, by their very nature, amoral, is an opinion Eysenck also had when implementing his theory of morality. According to it, there is a stable internal non-cognitive disposition, in the form of a specific set of basic personality traits, which predisposes the individual to *amoral behaviour*. Conscience, according to his opinion, is created only by the conditioning process during the socialisation process. Forming a conditional reflex is difficult because of: a characteristic personality structure, the absence of adequate socialisation influences or the existence of inadequate socialisation influences. (Eysenck 1964, 1976a, 1994, Eysenck & Eysenck 1970, 1971a, 1971b, 1976b, 1977, 1978, Eysenck & Gudjonsson 1989).

Many researchers of the origins of amorality from this region confirm the existence of deep personality roots of individual differences in the quality and quantity of *behavioural responsiveness* of human beings to exposure and moral norms, as a product of culture. According to the research undertaken, this disposition depends more on conative than on cognitive factors (Knežević & Radović 1995, Knežević et al. 1995), and, like moral views, it is formed partly as a consequence of the influence of defence mechanisms (Knežević 2003).

Because there has been a frequent discord of opinions about the behaviour of homo (a)moralis (this lack of harmony has also been observed in highly intelligent and highly social and academic achievements of people, those who are alienated from their surroundings as well as those exposed to the eyes of the general public and vulnerable to its critical thinking), empirical studies have been undertaken that have shown that the connection between moral thinking and moral behaviour is generally low and unsystematic (Rushton 1975, Santrok 1975, Dreman 1976, Jurković 1980, Blasi 1980, Pejović-Milovančević 1998). It has been shown that what is morally right is usually obvious to the individual of intellectual mediocrity, but in order to act morally right it is very often necessary to overcome impulses based solely on personal interest. Most situations have been shown to be such that a particular moral choice is much more dependent on the ability to control current impulses, delay or reject gratification of desires and urges, than it depends on the ability of sophisticated reasoning. (Saltzstein 1994)

This takes us back to the very beginning of the presentation and also justifies understanding of the existence of a certain quality and maturity of the moral fabric of man as largely a consequence of differences in understanding of the importance of certain determinants in its emergence. Therefore the difference of determinants is the reason that makes an overall difference between the homines morales, sometimes even diametrical, which is testified by their very existence and daily life experience.

It is noted that modern society is one in which modern man, and often in the escape from existential insecurity, has an urgent need for self-actualisation. It increasingly separates him from his significant other and, compromising his social urges, from himself, his social “nature”. We see the further process of individuation and isolation as ideal for the further maintenance of (we also said sometimes very different) once established individual morality of people living in the same society. According to the phenomenon we describe, it is a society without borders and of global proportions. In line with that, there is the belief that today, in the context of society in general, it would be most correct to speak of the existence of a moral pastiche, i.e. a mixture created by interweaving, permeation and blending of many moralities (Vester 1995,

Bauman 2001) by many individuals and groups living at the same time in the same society. And that such a modern society is one in which “not only does modern man have his biography; he also lives it” (Turza 1996, 2009).

If the society today is perceived as the one characterised by “morality without a code of ethics”, in which the moral dispositions and moral achievements of the individual determine the existence of the entire social morality (Bauman 2001), we think that it would be quite risky to conclude, on the degree of man’s adaptation to it, about the degree of his moral maturity.

This diversity of individual systems of values and/or individual moral behavioural styles is evident in almost every level of interpersonal relationship, and in particular within those spheres of society that are public. The field of medicine, as one of them, implies the day-to-day relationship of a medical professional-patient / researcher-subject in medical research, i.e. implies an abundance of moral situations. Every *medical situation* is as professional-medical (requires possession of medical knowledge), as ethical (requires possession of virtues). Even white coats, as the common denominator of all medical professionals, and the common attire beneath which there is the universe of the varieties of personalities and their different systems of values, are similar but not the same. That is why we see the specific task of ethics in medicine in directing *by medically specific ethical values and norms different varieties of morality of medical professionals* towards ethically correct thinking and treatment in all practical, and scientific and research medical situations. And there are always a number of new biomedical ethical dilemmas that we are wondering about...at the same time asking ourselves if we could be more prepared for them.

BIOETHICS AS METAPOLITICS - A BRIDGE TO HOMO MORALIS

And while the field of medicine in health care, prevention and disease control relies on the established medical knowledge as well as medical-ethical principles, as guides to proper thinking and acting of homo moralis of medical provenance in medical situations, it seems to us that politics is, albeit also public, still a (dis)orienting polygon with many unclear signs in it. We see politics, especially through its consequences, as one of the social spheres where these different varieties of systems of values of individuals or groups are publicly embraced, touched, or terribly unhappily pursued... all in the name of understanding man and his world. Jurić, in a similar way, thinks about that in his Ethics of responsibilities of Hans Jonas. (Jurić 2010). How to prevent postmodern society from becoming postmoral? What in this case should be done to build and maintain the moral maturity of man (homo moralis) and society?

Let us underline that politics and politicians obviously are not capable of efficient, effective and successful dealing with numerous problems which all of us are facing nowadays, regarding almost all aspects of life, but who then is capable of it? (Radenović & Turza 2012).

We suggest this possible answer: metapolitical instances, besides art and/or literature, surely it is bioethics. This idea is based not only on philosophical, sociological, political, medical etc. theories, but also on the kind of bioethical experience of tolerance and cooperation which we noticed in the region of Western Balkans (ibidem).

But let us expose the theoretical basis of the above-mentioned idea. Namely, as it is well known, Potter defined bioethics as a discipline of the balance between man and nature, and as a bridge to the future of mankind (Potter 1971). According to Potter, this also implies that bioethics is a bridge between natural sciences and humanities, which furthermore and among other things, implies a strong connection between bio-medicine and ethics, between bioethics and ecology, between bioethics and politics, economics, political science, theology etc. in both theoretical and practical sense (Potter 1971). In the context of postmodern global society, applied bioethics as a form of metapolitics could be the model for orientation knowledge and could prevent postmodern society from becoming postmoral society. As an integrative and pluriperspective project, bioethics reaffirms and renews the values and norms concerning good and evil or right and wrong in the context of life in general and of its numerous varieties, as well as individual and group attitudes towards those values and norms. The pluralism of perspectives and life as such are the backbone of the concept of integrative (Jurić & Čović 2018) and integrating bioethics and also of the bioethics as metapolitics regarding the actual political context (Radenović & Turza 2012).

Potter’s general conception of integrative bioethics can be applied to numerous more specific socio-cultural contexts. Practically, it means that bioethics as metapolitics can be very fruitful intellectual and practical device that might have an integrating role within the above-mentioned Western Balkans which experienced a disastrous, bloody disintegration of a federation, pauperisation, destruction of society (sociocide) and killing of morality (moralocide), as well as devaluation and absence of care for all aspect of life (ibidem). And not only Western Balkans with its experience, in fact in the very nature of (post)modern, contemporary politics prevails the Thanatos (Sigmund Freud’s notion). Regarding that, we underline certain facts: some two centuries ago the most developed countries were approximately 3 times richer than the poorest regions of the world and today the richest are 83 times richer than the poorest countries; we live today in the world in which every few seconds a child dies due to lack of

food etc. (ibidem). It is sufficient to say that politics and politicians had brought them about, but we have to underline that it is about politics and politicians without bioethics as a metapolitics and without bioethics as an orientation knowledge.

The operationalisation of metapolitics through bioethics as orientation knowledge is bioethical education (Radenović 2013). Bioethical education, through all levels of education, and especially at the higher education level, primarily through the education of future physicians and all medical professionals, provides orientation knowledge, more precisely, a moral compass for the opinions, feelings and actions of physicians and non-physicians in a global postmodern society (Turza & Radenović 2012).

CONCLUSION

Despite the fact that above-mentioned bioethical education does not offer definitive solutions for numerous medical and non-medical delicate situations, we have to keep in mind that through specific thought experiments, analyses, and considerations of moral dilemmas, it provides knowledge of the complexities of postmodern society and postmodern man, and can prevent the wanderings within moral pastiche (mixture). In this way, through bioethical education metapolitics could prevent the victory of Thanatos, who prevails in the contemporary concept of politics and in postmodern global society.

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