

VIRTUE ETHICS AND THE ANALOGY BETWEEN PHYSICAL AND PSYCHOLOGICAL HEALTH

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An objection often leveled against virtue ethics is that virtue is culturally relative. So what may count as a virtue in one time and place may show up as a vice in another. The character traits that a community values and promotes, it is claimed, are contingent on the community's political system, the structure of social hierarchies, and even its economic system. To cite just one example, the warrior virtues of physical strength and pride were considered extremely valuable by Homeric Greeks but either sinful or neutral by early Christians; similarly, humility was held as a virtue among Christians and a vice among Homeric Greeks. The upshot of these examples is that virtue cannot serve as the basis of a trans-cultural ethical system. Therefore, virtue ethics is severely limited in its ability to make any normative prescriptions regarding how we ought to live: it may tell us how we ought to live as Americans or Christians or Greeks, but it cannot tell us how to live *as human beings*. If this objection holds it would effectively eliminate any serious moral criticism from the standpoint of virtue ethics, for all such criticism could reveal is that someone is not living up to some conventional standards of behavior. While this is certainly useful, it hardly requires an ethical theory to point out hypocrisy. Virtue ethics, like all moral theories, purports to establish a deeper standard against which to measure ourselves as human beings.

In response to the objection that virtues are culturally relative, we may argue that virtue is a sort of psychological health and then appeal to an analogy with physical health. Plato vigorously pursued this line,¹ especially in the *Republic* and the *Gorgias*, but he did not explicitly examine its viability. This is the question I will address here: is the identification of virtue with psychological health and the analogy between physical and psychological health strong enough or plausible enough to warrant the inference to the existence of a trans-cultural account of virtue? And what must we minimally accept about human nature or the human psyche to make this approach viable?

In what follows I will first discuss some of the advantages this approach offers to supporters of virtue ethics. Then I will consider several objections along with replies.

Advantages for Virtue Ethics

There are a number of features of physical health that we would like to preserve in the analogy with psychological health. Perhaps most important among these is the fact that physical health is not simply a matter of social convention. Although there are some important differences between male and female, and even from one person to the next, human physiology is human physiology and it has not changed dramatically from the time of our earliest recognizable ancestors. Despite minor physiological variations, there are many relevant similarities among the healthy physical states of different individuals. For example, we will almost certainly not find an individual who flourishes physically with failing kidneys, lungs or heart. So the circumstances under which the human body

flourishes are, to a large extent, immune from social, political and cultural factors. A physically healthy person, we may imagine, would appear physically healthy in any time and in any place. In short, biology, chemistry and physics provide standards that are entirely independent of convention. By contrast, this person will probably not be considered beautiful in every time and place, since aesthetic standards are notoriously subject to cultural shifts. But the grace and strength of an athlete, for example, remains a clear indication of health. If the analogy works, we may suppose a similar trans-cultural standard for psychological health.

The success of medical science, despite its glaring failures, also substantiates the point that the healthy condition of the human body is determinate enough to yield practical knowledge. So, again, if the analogy holds, we may infer from the existence of medical knowledge to the existence of psycho-therapeutic knowledge. In both cases we could point to preventive and curative measures. And in both cases we can excuse the physician's failures even if his knowledge has been correctly applied. For medical science is stochastic: once the proper aim has been taken and all due care exercised, the success or failure of the treatment is no longer entirely up to the physician.

Finally, physical health is desirable for its own sake and for the sake of its consequences. No one in his right mind would choose to be ill if he were able to be healthy. The same would apply to psychological health. And if we are able to show that psychological health is virtue, then we have the conclusion that Plato argued for at length in the *Republic*: given the proper understanding, everyone would desire to be virtuous.

Objections to the identification of psychological health with virtue and replies

First we will consider three objections to the identification of psychological health with virtue.

a) *Our current psychotherapeutic conception of mental health is far too thin to be a plausible candidate for virtue.*

One of the common features of the variety of psychotherapies practiced today is that they tend to aim at the relatively modest goal of enabling the patient to function within his community rather than the more lofty goal of developing and promoting the patient's virtues. The more modest goal is of course most reasonable when dealing with crippling neuroses and other psychological impediments to what are considered normal behaviors. In terms of the analogy with physical health, we may say that the physician will not aim at transforming the physical wreckage of a heroin addict into an Olympic athlete. But the prevailing concern with returning the patient to a functioning state has tended to obscure the fact that psycho-therapists are in need of an account of a full and robust psychological health at which they may aim.² Short of this, the removal of impediments to engaging in "normal behavior" is subject to the objection that these normal behaviors are vicious. Imagine the psychotherapist who successfully removes the terrorist's fear of engaging in the normal terrorist behavior of killing innocent people.

Fortunately, we may concede this point without admitting it as an objection. The fact that psychotherapeutic theories lack a robust account of psychological health says nothing about the possibility of developing such an account.

b) *If we accept the identification of psychological health as virtue we must also accept the apparently absurd claim that the mentally ill are vicious or at least immoral.*

We need not concede this claim. The expression “mentally ill” refers, in large measure, to people who are in need of psychiatric treatment for various neurological disorders. But such disorders should be classified as physical illnesses, and as such would not qualify as vice any more than any other physical illness.

The more difficult and interesting cases will be those neuroses or disorders that do not appear to have a causal origin in the agent's physiology (assuming such disorders exist). If the causes of one's psychological disorder are indeed within the agent's control, then it is plausible to describe *these* disorders as vices. In fact, it is even more plausible to trace immoral behavior back to some such disposition that the agent habituated himself to by means of a repeated behavior.

c) *It is unacceptable to infer from a descriptive account of psychological health to a normative account of virtue.*

As Hume famously argued, we are never justified in inferring an “ought” from an “is.” This can be quickly dismissed, without even confronting the general validity of this type of objection, by pointing out that any concept of psychological health is already normative. So we are not moving from a purely descriptive account to a normative one. Although I may succeed at giving a purely descriptive account of psychological (or physical) health, there would nonetheless be normative implications implicit in my account. This is because we cannot be so detached from our own personal well-being as to comprehend a descriptive account of health and, yet, recognize no consequent imperatives regarding what we should do. There is clearly such an imperative implicit in a descriptive comparison between healthy and diseased lungs, whether or not one decides to give up smoking as a result.

If we provisionally accept the identification of psychological health with virtue, we may consider some more weighty objections to the analogy with physical health.

Objections to the analogy between psychological and physical health and replies

a) *The body's functions are empirically discernible, whereas the mind's alleged functions are controversial, and some argue that the human mind has no essential functions.*

It is clear that physical health only makes sense given some functional account of the organism. The health of the lungs can be understood only by explaining their role in the overall economy of the body. No other part of the body can do the job the lungs do, so it

is essential to our overall well-being that the lungs perform well. Plato famously employs the division of labor principle to illustrate this idea. But if there are no parts to the mind then how can there be a division of labor? And even if we grant the parts, why should we suppose these parts have any essential function?

Whether or not we grant the existence of distinct parts, we may at least acknowledge that the mind is capable of an array of distinct tasks or functions. So, for example, our ability to make purely logical inferences without any reference to semantic content is quite distinct from our ability to manipulate spatial objects. So we may still apply a division of labor principle while remaining agnostic on the metaphysics of mental parts. Whatever it is by which we successfully manipulate spatial objects should not, and indeed cannot, be enlisted to make logical inferences.

But now the problem seems to be that such meddling is impossible. If so, it would be impossible to violate this division of labor principle, which would imply that all human minds conform to it, and that we are all psychologically healthy. What we need to do is follow Plato in bringing appetites on the scene. My examples of logical and spatial manipulations would fall into the larger category of reason for Plato. The real problem arises when reason confronts appetite.

Here it must be not only possible, but quite likely, that appetite may take over the role of reason in guiding one to perform an action. This immediately strains the analogy with physical health for the following reason. The lungs simply cannot do the job of the kidneys, and we cannot see with our ears, or hear with our nose, etc. Illness in the body is the result of some parts malfunctioning, not a physiological coup in which the liver and intestines storm the citadel of the brain.

It seems then that we should modify Plato's version of what causes psychological illness in order to preserve the analogy. Let us say that when reason or appetite does not do its job properly, then some sort of psychological illness arises. The next question is obvious: what are the proper jobs of reason and appetite? This leads us to the most difficult type of objection to the analogy.

b) *Physical health is morally neutral, whereas psychological health (construed as virtue) is not.*

In terms of “proper jobs,” one might object that reason succeeds in fulfilling its function simply by reasoning, just as appetites succeed by desiring. What conclusions reason reaches or what goods the appetites desire is beside the point. If so, psychological health, like physical health is morally neutral, and thus cannot play the normative role of virtue.

Physical health may be instrumental in accomplishing any number of immoral ends. The healthy terrorist is more efficient thanks to his good health. But will he be more efficient thanks to his good mental health also? If so, psychological health is, like physical health, morally neutral. But now substituting “virtue,” we would have to say that the terrorist is more efficient thanks to his virtuous disposition. It would then be the case that the

terrorist is better able to murder innocent people because of his courage, his friendship with his colleagues, and his conviction that what he is doing is right.

To maintain the analogy we must insist that psychological health is incompatible with viciousness just as physical health is incompatible with disease (at least with respect to the same organ at the same time). So let us reconsider a crucial premise in the objection: will the terrorist really be more efficient due to his good mental health? It is certainly safe to say that he will not be as efficient if he suffers from crippling neuroses. But the objection alleges that he will be more efficient with a robust mental health than without.

First, note that we are not dealing with the lesser objection that a psychologically healthy person may sometimes commit evil deeds. In keeping with the analogy, it makes perfectly good sense to say that a physically healthy person will sometimes succumb to illness. The objection here is that by virtue of his psychological health a person might be disposed to commit evil, and in fact might be better equipped to do so.

One possible response is that psychological health is constrained by epistemic requirements. In particular, we might argue that to be psychologically healthy one must have true beliefs regarding the value of one's goals, plans, actions, desires, and so on. This is essentially the view we find in the *Republic*, elaborated in the ambitious metaphysics of the central books. Although such an account cannot be ruled out in any simple way, it is worth noting the formidable challenges it faces. Most importantly, we would have to show that the relevant sorts of evaluative truth can be discovered, or at least provide some plausible reasons for thinking such truths exist. Short of this we would have to acknowledge that no one is, or even *can be*, psychologically healthy.

I do not believe Plato's ambitious metaphysics is the right way to provide those constraints. But I do believe that certain epistemic constraints are required to adequately defend the identity of psychological health with virtue. To see why, we may develop this last objection further as a reductionist might.

c) *Psychological health is actually a type of physical health.*

If it were possible, in principle, to attain psychological health by pharmacological means, then it would no longer be virtue as understood by the ethicist. The proper function of the mind would then be identical to, or, at least in some sense, reducible to the proper function of the brain. Whether that optimal physical state is achieved through moral struggle, meditation, or neuroscience would be irrelevant. Our worries that the person had not *earned* his health in the latter case could be dismissed as part of our antiphysicalist prejudice, i.e., our allegedly indefensible views about free will and responsibility.

It remains quite plausible, however, that this optimal physiological state of the brain is still consistent with psychological distress. I can imagine that my brain is functioning optimally even while I am entertaining tremendously disturbing beliefs. In other words, it is plausible to maintain that the brain is functioning properly while the mind is not. This indicates the following disanalogy: particular intentional states, e.g., beliefs and desires,

are required for psychological health, i.e., virtue, but are not required for physical health. If so, having the right sorts of beliefs and desires will be an essential element in the account of the mind's proper function while it is completely lacking from the account of the body's proper function. It should come as no surprise that the analogy has its limits—all analogies do.

The difficulty now is to articulate what the right sorts of beliefs and desires are that constitute the proper function, and, thus, health of the mind. This is not a matter of showing *what* we must believe, for it is likely that there will be an enormous variety of particular beliefs that will serve. The approach I propose is to consider cases of vice and determine what intentional states contribute to that vice. We may then negate these conditions and offer them as necessary (though not sufficient) for psychological health.

I will conclude by briefly considering a candidate for such a condition: the false pretension to knowledge.

When this attitude is engendered with respect to evaluative issues a variety of moral vices may follow. Consider the view that money is genuinely good, accompanied by the conviction that one has figured out all there is to know about the value of money. The money-lover will arrange his life around the pursuit and acquisition of money. That much is fine; such a life could still be virtuous. But the conceit of knowledge promotes a rigid adherence to the value of money which allows for self-indulgent deceptions regarding the values of other things. Once the money-lover has given up the inquiry into the value of money and accepted it as irrefutable he will begin to interpret the value of such things as art, friendship, love, and health in monetary terms, for it can never occur to him that the good of friendship may override the good of money. Although such a development is not necessary, I believe there is a strong psychological tendency for the accretion of further dogmas. Taking oneself to have satisfied the desire to understand is enormously comforting and, thus, it is nearly inevitable that it will spread. The money-lover will become a cynical, self-styled realist who confidently dismisses any nonmonetary reasons for valuing friendship, love, or art, but without actually considering those reasons. Thus, the money-lover's epistemic vice of arrogance is the root of other vices. For example, his conviction will likely promote avarice, regardless of how much money he has.

In conclusion, what I hope to have shown is that the identification of virtue with psychological health and the analogy with physical health provides a very promising foundation for virtue ethics.

Notes

1. For example: *Republic* 444c-e; *Gorgias* 464a, 479a-c, 504a-d, 514d-e; *Charmides* 156e-157e, *Phaedrus* 270b; *Meno* 72b-e, *Laws* 653.

2. See Guignon, C., F.C. Richardson, and B. Fowers. *Re-envisioning Psychology: Moral Dimensions of Theory and Practice*. San Francisco, 1999.