

Ethical Issues in Family Practice: My Culture – Right or Wrong?

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Introduction

Health professionals educated in and practicing Western medicine in multicultural settings often face moral dilemmas resulting from exchanges with patients whose cultural background holds different beliefs and standards than does their own. For example, one of the best known is that of female genital mutilation (FGM). The main argument held by societies in which FGM is traditionally practised is that the prohibition of the practice would lead to the dissolution of the society's cohesion. The moral objection, however, is that FGM is intrinsically wrong. As emphasised by Rachels Rachels, J. 2001. *The Challenges of Cultural Relativism*. In: *Moral Relativism: A Reader*. P K Moser & T L Carson,(Eds.)New York: Oxford University Press: 63., if a practice is harmful – as it is with FGM – there is an *objective* moral reason to condemn it.

But there are some cultural practices and beliefs which are not as clear when it comes to moral judgment. As health professionals, we should be culturally sensitive. We ought to respect other cultures' values and show appropriate tolerance for various reasonable cultural codes and beliefs. This, however, does not mean that all beliefs and practices are equally admirable or that we ought to withdraw moral judgements that strike us as being clearly justifiable or right. These attitudes reflect nothing but moral relativism. (*SA Fam Pract 2005;47(4): 47-48*)

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us as being clearly justifiable or right. These attitudes reflect nothing but moral relativism.

Moral Relativism

Relativism is the theory that the choice between competing or conflicting theories is arbitrary since there is no objective truth. It states that conflicting judgements can be equally correct or equally justified.² Moral relativism is an exceedingly complex matter. It is subdivided into three parts: 1) descriptive cultural relativism; 2) normative or moral requirement relativism; and 3) meta-ethical relativism. In brief, *descriptive cultural relativism* claims that different individuals and different societies accept different moral beliefs or standards. It views ethical truth as a myth. Therefore, various cultural codes determine what is right or wrong for them; no code has any special status.³ *Normative or moral requirement relativism* states that one is bound by one's own moral principles or those of the society to which one belongs.⁴ In other words, something is morally wrong if a person or a society thinks it is wrong according to the moral standards of that

person or of his or her society.

According to this view, a person who follows his or her conscience is doing the right thing; and it is always wrong not to follow what one's conscience dictates. At first glance, one might well agree with this rule, but what if my conscience dictates me to do wrong (as it appears to have been the alleged case with some Nazi high-ranking officers). *Meta-ethical relativism* is the theory that no moral judgements or standards are *objectively* true or false. It claims that ethical statements express the attitudes of the speaker (viz., emotivism) or what is the custom of a society (viz., naturalism).⁵

Moral Realism

Moral realism or objectivism is the opposite of moral relativism. Moral realism is the theory that states that there are moral facts and real moral properties whose existence and nature are independent of our beliefs about right and wrong.⁶ It is the claim that there is a single standard of validity for moral principles. For some, moral realism also recognises that what valid moral principles allow or require can vary.⁷ Let

us see on what basis moral realism can rest. Theories of ethics are generally grounded in the following: 1) the authority of God's will (deistic Natural Law); the secular idea of human excellence (virtue ethics); 3) the desire to be in unity with our fellow creatures (JS Mill's utilitarianism); or 4) the desire to be able to justify our actions to others.⁸ Any of these starting-points of morality gives a rationale concerning how it is good or right for us to live. Moral realism, thus, implies that some things are good or bad, or right or wrong *independently* of facts about the attitudes (e.g. beliefs, desires, inclinations) of moral agents.⁹

Moral Realism versus Cultural / Moral Relativism

Moral realism is thus diametrically the opposite of moral relativism in general and cultural relativism in particular. It is true that many factors cooperate to produce a society's customs or mores. Amongst them are religious beliefs, life conditions, and values. Cultural relativism just shows or witnesses the existence of different beliefs and traditions. It does not follow, though, that these beliefs may not be wrong nor that there is no objective truth. Neither does it follow that wrong practices cannot be criticised or condemned both by insiders and by outsiders.

There is a natural tendency we have to believe that what is right is what our culture / society approves of and that what is wrong is what our culture / society disapproves of. Therefore, cultural relativism may seem plausible and acceptable. There is, in addition, also a natural reluctance of allowing outsiders to judge or even criticise / condemn our own societal standards and norms. But we have to ask ourselves, What if we were to agree with cultural / moral relativism? If cultural relativism is true, it follows that we cannot judge our own customs in terms of morality. Cultural relativism rests on the endorsement of traditions. But to endorse cultural relativism is to deny the fact that cultures change.

For example, let us look at the nature of cultural traditions. Gyekye¹⁰ defines traditions as, "... anything that has endured through generations ... usually associated with the hallowed ways,

beliefs and practices of our forefathers ...". Moreover, as he later identifies¹¹, "To say that a belief or practice is handed down to a generation is to say that it is bequeathed to the generation, passed on to it." Thus, beliefs and practices are placed at the disposal of subsequent to criticise: accept, revise, refine, preserve, depreciate or abandon. Likewise, it

would nowadays seem strange if Donna's Scottish ancestors had not seen any further need for painting their faces blue and thus abandoned the tradition. But this is not to say that criticisms are necessarily aimed at renouncing the entire complex of a given inherited tradition, only some features of it. The reason for this is that the whole legacy of a past cannot be disavowed all in one sweep and at one time.¹² If one accepts this position, then the idea that we can and do judge our cultural traditions contradicts the argument from cultural relativism that says 'they admit of no argument'.¹³

In addition, if cultural relativism is true then one has to admit that what is right or wrong is decided by our society's norms and standards. But then we have a problem for somewhere it must be decided just who has the authority to define basic moral principles of a given culture. For example, a secular liberal who belongs to the same society as a fundamentalist Christian is bound to differ concerning moral rules and codes of conduct. So just which position in the society is the absolute - the ethical or moral one? If cultural relativism is true,

there is no room for 'conversation' - for moral progress.

Conclusion

Disagreement about moral values and moral judgements as such does not rule out the possibility of objective moral values. Such disagreements often reflect people's adherence and participation in different ways of life.¹⁴ As pointed out by Kopelman¹⁵, we should beware of hasty judgements across cultures. But, despite the fact that many values are culturally and socially determined (and, therefore, not shared by other cultures) it remains that we share enough common needs, goals, and values as to be in position to discuss, assess, argue, and evaluate both objective and universal moral values and norms. Even within specific cultures there can and are passionate debate and disagreement over what is approved or disapproved of, right or wrong (e.g. abortion, euthanasia, etc.). This is what makes moral progress possible. What is under scrutiny is a specific practice; this does not mean that an entire culture or a particular tradition within it is condemned or treated with contempt. ♡

See CPD Questionnaire, page 45

References

- Rachels, J. 2001. The Challenges of Cultural Relativism. In: *Moral Relativism: A Reader*. P K Moser & T L Carson, (Eds.) New York: Oxford University Press: 63.
- Popper, K. 2001. Facts, Standards, and Truth: A Further Criticism of Relativism. In: *Moral Relativism: A Reader*. P K Moser & T L Carson (Eds.). New York: Oxford University Press: 32.
- Rachels, J. 2001. The Challenges of Cultural Relativism. In: *Moral Relativism: A Reader*. P K Moser & T L Carson, (Eds.) New York: Oxford University Press: 53.
- Carson, TL and Moser, PK. 2001. Introduction. In: *Moral Relativism: A Reader*. P K Moser & T L Carson (Eds.). New York: Oxford University Press: 1.
- Brandt, R. 2001. Relativism Refuted. In: *Moral Relativism: A Reader*. P K Moser & T L Carson, (Eds.). New York: Oxford University Press: 277-287.
- Moody-Adams, M. 2001. The Empirical Underdetermination of Descriptive Cultural Relativism. In: *Moral Relativism: A Reader*. P K Moser & T L Carson (Eds.). New York: Oxford University Press: 96.
- Scanlon, TM. 2001. Fear of Relativism. In: *Moral Relativism: A Reader*. P K Moser & T L Carson (Eds.). New York: Oxford University Press: 146.
- Ibid: 153.
- Carson, TL and Moser, PK. 2001. Relativism and Normative Nonrelativism: Basing Morality on Rationality. In: *Moral Relativism: A Reader*. P K Moser & T L Carson (Eds.). New York: Oxford University Press: 287.
- Gyekye, K. 1997. *Tradition and Modernity: Reflections on the African Experience*. New York: Oxford University Press: 219.
- Ibid: 221.
- Ibid: 223.
- Sumner, WG. 2001. Folkways. In: *Moral Relativism: A Reader*. P K Moser & T L Carson (Eds.). New York: Oxford University Press: 74-77.
- Mackie, JL. 2001. The Subjectivity of Values. In: *Moral Relativism: A Reader*. P K Moser & T L Carson (Eds.). New York: Oxford University Press: 267.
- Kopelman, L. 2001. Female Circumcision / Genital Mutilation and Ethical Relativism. In: *Moral Relativism: A Reader*. P K Moser & T L Carson (Eds.). New York: Oxford University Press: 307-326.