

Philosophy News

The Unexamined Life is Not Worth Living

Volume 3, Issue 1

Dr. Michael Mulnix and Dr. Severin Kitanov, Editors

Welcome Address

Dear Salem State students, faculty and staff, the 2009 issue of our department *Newsletter* has arrived. This year has been a busy one for the department. The Salem State Philosophy Club was made official and is now a recognized student organization on campus. Be sure to check out some of the exciting things that the club has been involved in, and upcoming events, on page 2. Also, we encourage everyone to regularly check the club's Facebook page for information. In this issue you will also find the 1st and 2nd place essay winners from this year's essay contest. Congratulations to Arthur Oberheim and Cailin McFarland for winning this year's contest and for writing two great pieces of philosophy for us all to share. We have also included an interview with new Provost, Dr. Kristin Esterberg, conducted by Dr. Kitanov. Thanks to everyone in the department for helping us pull this together, and many thanks to the wonderful contributors. Enjoy!

– Dr. Michael Mulnix

Interview with Dr. Kristin Esterberg, Provost & Academic Vice-President

Q: Dr. Esterberg, I understand that you hold a Bachelor's Degree in Philosophy and Political Science from Boston University. Can you share your impressions of your philosophy studies?

A: "I embarked upon my philosophy studies as a freshman with a classics course on Plato. I remember that we sat in a circle, and I also recall Professor Ken Quandt trying to explain an *aporia*. This was the first time I ever encountered philosophical questions. What I loved the most about my experience of philosophy was learning how to read texts very closely. Philosophy also sparked my interest in questions regarding the meaning of human existence, our place in the universe and our role in a democratic society. I still have the collection of Plato's dialogues and the fragments of the Pre-Socratics on the shelves of my home library."

Q: You also hold an MA and a PhD in Sociology from Cornell University. To what extent did your earlier Philosophy studies contribute to your study of Sociology?

A: "I discovered my interest in sociology after taking a seminar on Marx, Durkheim and G.H. Mead. I eventually went to Cornell and fell into a heavily quantitative sociology department. My philosophy training helped a great deal with the work on my doctoral dissertation. Philosophy also made me a more careful writer and contributed immensely to my first job as an editor for Houghton Mifflin Publishing Company. I think that philosophy appeals to the introvert in me whereas sociology appeals to the extrovert in me."



Dr. Esterberg introducing distinguished water use and conservation expert – Amy Vickers – at the Salem State Earth Day Lecture Series on March 31, 2009

(Continued on page 2)

The Philosophy Club

The Philosophy Club is an SGA-recognized student group at Salem State College. The group was established in fall 2008 by Cayla Thompson, and became officially recognized in January of 2009. The group is open to all undergraduate students of the college and we hold meetings once a month, plan events such as *Nihilism Night*, *Movie Night*, and trips to philosophy lectures on a regular basis throughout the semester. – Hilary Hebert

CLUB OFFICERS

Dr. Michael Deere

Club Advisor

Ashley Randeale

President

Cayla Thompson

Vice President

Jenn Carnevale

Secretary

Amy Zolla

Treasurer

Hilary Hebert

Public Relations

More information about current and upcoming events is available on our

Facebook group webpage:
“Salem State Philosophy Club.”

(Continued from page 1)

Q: Have you written articles or books on specifically philosophical topics or problems?

A: “I have written mostly as a sociologist, not a philosopher. Almost all of my research is empirical in nature. It is interview based and qualitative in character. I have always been deeply interested in peoples’ stories, and I have had the desire to spend more time in the world in which people live.”

Q: Our department is deeply interested in instituting a traditional philosophy major at Salem State. Would you support our proposal if we present you with a strong case that the program will not cost the college more money and that we have the necessary faculty resources to handle the burdens of the program?

A: “I will look at the proposal with an open mind.”

Interview conducted on Friday, February 27, by Dr. Severin Kitanov

CONGRATULATIONS GRADUATES!

The Philosophy Department faculty and staff would like to congratulate the following students upon their successful graduation:

Philosophy Minors – Scott Allbright, Maximilian Aprans, Kristen Beals, Andrew Cardinale, Jennifer Carnivale, Ian Drinkwater, Carla Gerber-Weintraub, Benjamin Kelley, Kaylee McPhail, Natalia Nikulshina, Anne OToole-Bolthrunis, Timothy Ring, Kenny Silva, Daniel Squire, Michael Zavarella

Applied Ethics/Philosophy of Art and Culture Concentration Majors – Jessica Hendrick, Robert Hughes, Maximilian Aprans, Christine Ouelette, Mary Brzozowski, Cailin McFarland



NOTA BENE!

Carla Gerber-Weintraub was accepted into the graduate Social Work program of both Simmons College and Smith College as an advance standing student. Carla has accepted the offer to go to Smith College.

Christine Ouelette was accepted into the graduate program of New England School of Law. Christine is still waiting to hear about application status at Suffolk University.

MOVIE NIGHT: BLUE VELVET

The first Philosophy Club Movie Night took place on Thursday, September 25th with a directed viewing of David Lynch’s classic *Blue Velvet*. The student audience received the movie with great interest and enthusiasm. Dr. Michael Deere and Dr. Michael Mulnix moderated the follow-up discussion. As Dr. Deere’s comments point out, the first movie night of the academic year was a great success. Read also Ashley Randeale’s reflections on the movie included in this issue.

Well, Philosophy Club Movie Night was a stunning success. Thank you all very much for coming. We had an excellent turnout, and the discussion after the movie was spirited and profound. There was no one, it seems, that was not touched in some way by the film, and Mike Mulnix and I had the simple task of directing the student discussion rather than leading it. Among the many positives from last night is that we now have an (unofficial) official club. We elected officers and have given our new officers tasks. I will be speaking with the representative from the SGA in the next few days, and Mike and I will be coordinating with the club to make use of our momentum and try to turn it into more money! I am told that we will initially have access to 250 dollars fairly immediately, and the hope is that we shall get more. Thank you all once again for helping to make this event the success that we hoped it would be.

– Dr. Michael Deere

Reflections on Blue Velvet – A David Lynch Film

David Lynch’s *Blue Velvet* is a voyeuristic look into the disturbing underbelly of idyllic life. The movie opens with a view of a white picket fence with beautiful blood red roses. We then see a bright fire engine passing with a happy looking fireman, cheerful children crossing the street, and an everyday man water his lawn. As effortlessly as these scenes appeared, just as quickly they are gone. The man watering his lawn clasps his chest and collapses. The camera pans under the lush green grass to the bug-infested, terrifying world below the seemingly placid suburb.

If *Blue Velvet* shows us nothing else, it declares that there is a seedy world within our world – we only need to make the effort to find it. Within our world of sunlight and laughter lies a world full of rape and murder. We associate the suburban dream with our everyday surface life, and the world under the grass with the ‘other’ life, the life that doesn’t affect us, or the

life of the unconscious. What is interesting about *Blue Velvet* is that the parts of the movie that seem the most real to us are *not* the scenes of fire engines and happy children, but the face of a woman being raped. We find moments of pain, moments of tension, to be the moments we can identify with over the moments of content bliss. Pain feels real, and we need that pain to feel as though we are real, that we are living. From this point, it is much easier to realize that it is not uncommon for most sexual relationships to have some aspect of *algolagnia* (receiving sexual pleasure from pain). Even just enjoying getting your hair pulled during sex depicts the strong correlation between pain and pleasure.

Blue Velvet forces us, as viewers, to look at the parts of ourselves and our lives that create the most tension, the most distress and face them head on. David Lynch creates a world in which our most basic ideals, our everyday assumptions about our existence are turned upside down. And for a brief moment, we get a glimpse into what we are beyond our idyllic façade.

– Ashley Randeale

PHILOSOPHY CLUB EVENTS AND ACTIVITIES

The Philosophy Club has had an amazing start this year. In January, the Club held its Kickoff Meeting, and during the last week of January, the group held the first official Nihilism Night of the year at Salem Beer Works. To end the month, students attended the Lecture on Plato’s *Phaedo* by John Sallis at Boston College. In February, the group held the first event in a series of discussions with philosophy professors about their research and published papers. Dr. Michael Mulnix shared his (soon to be published) work, “Harm, Rights, and Liberty: Towards a Non-Normative Reading of Mill’s Liberty Principle.” The officers of the Philosophy Club would like to thank to Professor Mulnix for his participation in this event. Also held this month, was the Undergraduate Philosophy Conference at Endicott College featuring two students from Salem State College. Finally, at Salem State’s yearly Darwin Festival, David Livingstone Smith (Ph.D. from the University of London) gave a lecture on human nature and war. The lecture was sponsored by the Philosophy Department.

PETE DEORIO AND ROB HUGHES AT ENDICOTT COLLEGE

This year, Endicott College's Undergraduate Philosophy Conference dealt with topics on Philosophy and Popular Culture. Students from Boston College, Endicott College, Gordon College, and Salem State presented work on topics ranging from superheroes and violence to YouTube and tattoos. The first panel dealt with the topic of "Troubled Heroes," where Pete DeOrio of Salem State presented the paper "Sartre and Superheroes: Batman, Spiderman, and an Existentialist Ethic." In his talk, he referred to Sartre's belief that each man is responsible for his existence as well as for mankind. DeOrio linked this with the idea that if humans always choose the best action (which then is the best for all humanity), then nothing is good or bad, but it is subjective. A number of questions were raised: If the ideal of man is the way it is supposed to be, then does one genuinely have infinite choices or just one choice? Also, does it mean that man is limited to the subjective life? To Sartre, the individual self is good, and cartoons such as Batman and Spiderman can be used as examples of Sartre's philosophy and even reveal weaknesses in Sartre's philosophical positions. Day two of the Conference dealt with the second panel's discussion of Aesthetics and Popular Culture, which included the talk "Public Bodies, Private Selves: Tattoos and Self-Expression" by Rob Hughes of Salem State College. Hughes examined the reasons people get tattoos and paralleled that with existentialist ideas from Kierkegaard and Sartre: "We find incompleteness or lack in ourselves, and man's search for this idea won't ever finish." Hughes pointed out that tattoos can be seen as a representation of one's internal struggle, whether or not a tattoo is done for show, to represent an achievement, or just for oneself. The students who participated in the Undergraduate Philosophy Conference discussed a wide variety of topics and thoroughly explored connections between philosophical thought and current culture.

—Hilary Hebert

OPEN FORUM LECTURE SERIES AND GUEST LECTURES

SEVERIN KITANOV

Philosophy, Master or Servant: The Birth of Professional Philosophy and the Medieval University
September 25, 2008

Lecture abstract: The lecture revisits Pierre Hadot's claim that the relations of power between philosophy and Christianity as defined by the medieval university contributed to the "theoreticizing" of philosophy and the abandonment of the ancient ideal of philosophy as a way of life. Illuminating evidence from actual university teaching practices, methods, and content was discussed.

MICHAEL MULNIX

Squaring Liberty with Utility
October 27, 2008

Lecture abstract: It is a long standing objection against act utilitarianism that it cannot offer a robust defense of individual liberty. Because this ethical framework is committed to evaluating the morality of actions according to their particular outcomes, there is no room to fit into this picture a universal and absolute protection of freedom. Nonetheless, there are two conventional approaches (each finding voice in the works of J.S. Mill) that can be used to defend the utilitarian against such charges. Unfortunately, I do not find either of these traditional arguments successful. Still, I think that one can offer an alternative act utilitarian defense of liberty by carefully attending to the differences among types of instrumental goods. Liberty is instrumentally valuable, to be sure, but it has the special character of being an *Independent Instrumental Good*, in the sense that it is a causally necessary condition for the pursuit of any intrinsic good.



DAVID LIVINGSTONE SMITH
The Most Dangerous Animal: Human Nature and the Origins of War
February 11, 2009

Dr. Livingstone Smith teaches philosophy at the University of New England. He is also the co-founder and

director of the New England Institute for Cognitive Science and Evolutionary Psychology. He earned his MA from Antioch University and his PhD in philosophy from the University of London, Kings College, where he worked on topics in the philosophy of mind and psychology. David's books include *Freud's Philosophy of the Unconscious* (Kluwer, 1999), *Approaching Psychoanalysis: An Introductory Course* (Karnac, 1999), *Psychoanalysis in Focus* (Sage, 2002) and, most recently *Why We Lie: The Evolutionary Roots of Deception and the Unconscious Mind* (St. Martins Press, 2004). His most recent book *The Most Dangerous Animal: Human Nature and the Origins of War* was published by St. Martins Press in 2007. His current research interests include deception and self-deception, the evolutionary psychology of war, incest and incest-avoidance and various aspects of analytical philosophy. He lives in Portland, Maine with his wife, Subrena.

"Man is the only animal that deals with that atrocity of atrocities: War. He is the only one that gathers his brethren about him and goes forth in cold blood...compulsed to exterminate [those] of his kind. And in the intervals between campaigns, he washes the blood off his hands and works for the universal brotherhood of man with his mouth."
— Mark Twain

On screen, there is a disturbing photograph of an incinerated Iraqi Soldier. Dr. Livingstone Smith quoted Mark Twain, but was interrupted temporarily by a false fire alarm. Once everyone settled down, he continued, noting that we are creatures who have a mixed attitude towards war. To Darwin, we want to enhance our survival, mating opportunities, and participate in selection by death. These traits that he mentions, are active in humans today and reflect the historical views that warriors have had high status and easier access to resources, prevalent

in today's culture where women flock to men-in-uniform, and soldiers are praised for giving their lives for our country. The warrior kills without remorse, and we as humans view enemies as parasites, or prey. We are the predator, with the task to destroy the enemy; as seen in war propaganda from WWII, the attack on Fallujah, and even on new minority groups in our country. Violence is not caused by things in society, such as video games. Instead, if a person's anger is stimulated by propaganda, violence will occur. Therefore, we, as people, must crack down on individuals and institutions that create and spread this kind of propaganda.

—Hilary Hebert



AMY VICKERS
Our Water-Short Future: Global and Local Perspectives
March 31, 2009

Amy Vickers is a nationally recognized water conservation expert and author of the award-winning *Handbook of Water Use and Conservation: Homes, Landscapes, Businesses, Industries, Farms* (WaterPlow Press, www.waterplowpress.com). She is also an engineer and President of Amy Vickers & Associates, Inc. based in Amherst, Massachusetts.

Amy talked about the world wide implications of excessive water use and discussed various water conservation strategies for a sustainable future. Amy's effective lecturing style, erudite presentation, lucid explanation of the research data, and charming personality stimulated a lively discussion in the faculty and student audience.



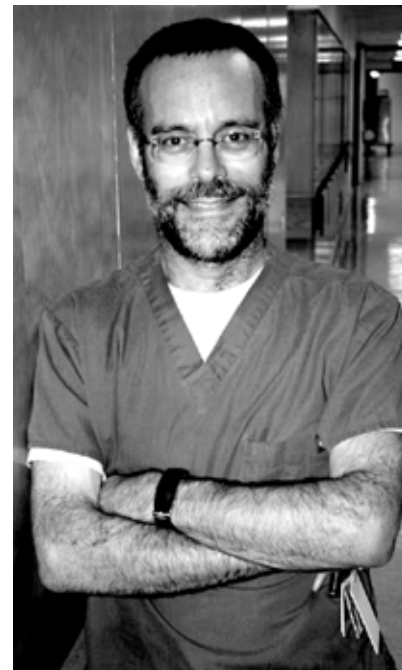
LISA KÄLL
Fashioned in
Nakedness: Bodies
in Light of the
Sartrean Gaze
March 16, 2009

Dr. Käll holds a PhD in Women's Studies (2004 Clark University, USA) and a PhD in Philosophy (2007 Center for

Subjectivity Research, Copenhagen University, Denmark). She is specialized in Contemporary Continental Philosophy, and especially the philosophy of Maurice Merleau-Ponty. Her main research interests are in the area of feminist theory of subjectivity and deals with issues concerning lived embodiment, bodily constitution of sexual difference and sexual identity, intersubjectivity, and the relation between selfhood and otherness. She is currently a visiting researcher at the Center for Gender Research, Uppsala University, where she is working on the project "Woman as Other – Nature, Body, Cyborg." She is also involved in the recently established Nordic Network for Research on Gender, Body, and Health, which is based at the Center for Gender Research in Uppsala.

Lecture abstract: One of the most forceful, brutal, and convincing accounts of how bodies are objectified, shaped, and made meaningful in and by their surrounding milieu is that given by Jean-Paul Sartre in his writings on the gaze and the body in *Being and Nothingness*. Sartre describes the ways in which bodies are exposed and vulnerable to the anonymous gaze of the other and in the midst of their vulnerability depend entirely upon being seen by the gaze for their meaning and for their very being. Although it sometimes appears as quite depressingly restrictive, Sartre's analysis of the gaze and his account of the body offer important resources for recognizing the force of objectifying categories and meanings in the constitution of identities. In the following, I will suggest that Sartre's almost remorseless descriptions of how the body is molded by the gaze of the other provide a productive point of departure for understanding the becoming of singular identities as they are lived at the margins and in the intersections of established categories which determine them in often oppressive ways. Being marked by difference, whether sexual, ethnic, racial, or other, is in many ways being trapped by the objectifying gaze of the other in such a way that the

ability to return the gaze and claim a subject position is deeply circumscribed. My aim here is to show how Sartre's account of the objectifying gaze and his description of the body can prove useful for understanding dynamics of oppression and discrimination on the basis of bodily difference and the ways in which these dynamics are operative in the constitution of subjectivity and identity. First, I will look at Sartre's analysis of the phenomenon of the gaze as the force which objectifies me before the other. Secondly I will turn to his descriptions of the body. My concern here is mainly with what he characterizes as the third ontological dimension of the body which is the body as it is subjectively experienced as objectified by the gaze of the other. This dimension of the body captures the tensions inherent in subjectivity and brings to light its perpetual exposure to its own unknown exterior as it is seen and constituted by the other. I will argue that Sartre's description of the third ontological dimension of the body and his account of the phenomenon of the gaze provides a way of bridging the dualistic framework upon which his philosophy rests without abandoning the relational structure between subject and object. The phenomenon of the gaze as a meaning-giving phenomenon is that which makes both subject and object and the relation between the two possible. It is under the anonymous and invisible gaze of the other that embodied subjectivity emerges as meaningful and that singular configurations of selfhood are constantly deconstructed and reconstructed.



DAVID SHERMAN
The Days of
Miracle and
Wonder: Ethical
Implications of
Modern Medical
Care and What
They Mean to You
March 24, 2009

As a nurse in the North Shore Medical Center's Salem Intensive Care Unit for the last 13 years, David A. Sherman, RN, MSN, CCRN-

CMC, has seen the effects of intensive care on patients, from the wondrous to the devastating. For most of that time he has

been an active member of the Medical Center's Ethics Advisory Committee, where he has helped write hospital policy on withdrawal of life-sustaining treatments and written consults on ethics in patient care. He is the author of several articles on bioethics, most recently "Family presence in cardiopulmonary

resuscitation: grief therapy or prolonged futility?" in *Dimensions of Critical Care Nursing*. In 2008 his petition to change state law on healthcare guardianship succeeded by unanimous vote of the State Legislature. S 1591, a result of another of his petitions, would make similar changes in healthcare proxy law.

FACULTY RESEARCH:
CONFERENCE PRESENTATION
AND PUBLICATIONS

Dr. Krishna Mallick, Department Chair

Publications:

"Buddhism" and "Hinduism and Peace Philosophy," in Nigel Young, ed., *International Encyclopedia of Peace*, Oxford University Press, 2009 (forthcoming).

Dr. Michael Mulnix

Presentations:

- "Can and Ethic of Social Welfare Make Room for an Absolute Value of Individual Liberty," Presented as part of Salem State College School of Arts and Sciences' Open Forum Series, October 27, 2009.
- "Thinking Critically about Critical Thinking," Presented at the Northern New England Philosophy Association Conference at Colby College, Waterville, ME, October 24-25, 2008.
- "Measuring Critical Evaluation Skills through the Use of Writing Portfolio Projects," Presented at the American Association of Philosophy Teachers 17th Biennial Workshop Conference on Teaching Philosophy at the University of Guelph in Ontario, August 6-10, 2008. Refereed Conference.

Publications:

- "Squaring Liberty with Utility," in *Review Journal of Political Philosophy* Summer 2009 (forthcoming).
- "Harm, Rights and Liberty: Towards a Non-Normative Reading of Mill's Liberty Principle," in *The Journal of Moral Philosophy*, vol. 9.1, 2009 (forthcoming).
- "In Praise of General Moral Rules," in *ASpect* (online).

Dr. Michael Deere

Presentations:

- "Crime and Community," Presented at the 7th Annual Conference of The Nordic Society for Phenomenology / Nordisk Selskab for Fænomenologi in Tampere, Finland, April 23-25

Dr. Severin Kitanov

Publications:

- "Durandus of St.-Pourçain and Peter Auriol on the Act of Beatific Enjoyment," *Philosophical Debates at Paris in the Early Fourteenth Century*, Stephen F. Brown, Thomas Dewender & Theo Kobush, eds. E.J. Brill: 2009, 163-178 (forthcoming).

STUDENT PEARLS

Michael Boroda: Philosophy Puns Fall 2008, PHL 100, Introduction to Philosophy

Atheism is a non-prophet institution.

What did the Nihilist buy at the grocery store? Answer:
“Nothing!”

Do philosophers sculpt with Plato?

A Freudian slip is when you say one thing but you mean
your mother.

When two egotists meet, it’s an *I* for an *I*.

Scientists recently built a robot that can play the violin.
It’s currently Turing the United States.

I am trying hard to think of more philosophy puns but I
just Kant.

Ashley Rande: Sexual Morality – Libertarian-Style

The libertarian view of sex seems like a breath of fresh air in a society that screams at us that sex is a serious subject only to be broached in the sanctity of marriage. For libertarians, “sex is an activity like any other”, like getting a cup of coffee or watching a movie. (Barry, 78) This view of sex focuses on the fact that the act of sex does not differ from any other activity, that it is our society that has put restrictions and a stigma on it. This view leaves the decisions about sex up to the individual, allowing persons to be as sexual as they want to be. Though, for every positive outcome of this viewpoint, there are sure to be many negative consequences that will shake our bedrock beliefs.

Two people can sit down together and have a cup of coffee. These same two people can have sex. What is it that makes us think that the latter is a much more important interaction? It has been engrained in our minds that having sex with someone is this monumentally important, life-changing event. Why? Why have we chosen to place such an importance on a physical, awkward act, and lay to the wayside intimate conversations? Sexual libertarians seek to free us from this sexual repression that keeps sex as a social taboo.

While sexual libertarians strive for freedom, on the flip side, such freedom carries with it its consequences. Those opposed to sexual libertarianism say: “Sexual libertarianism undermines public morality.” (Barry, 84) Sexual morality is like

a law in our society, and if we break one ‘law,’ what is to keep up from breaking more? If people in society start to view sex as just another activity and show disrespect for this moral law, they will not be as attentive to hold to other moral principles like honesty and loyalty. Once the importance of honesty and loyalty are undermined, the next casualty of our disrespect will be marriage.

Marriage hinges upon the foundation of loyalty, honesty and, of course, sex. The thought of sexual libertarianism scares people because they think that “unmarried people will have no good reason to get married because sex will be freely available... Married people will have little reason to stay married. After all, once marital fidelity goes, there goes the most important bond.” (Barry, 85) For many people, one of the reasons to get married is to have sex. Sex within marriage is looked at as ‘moral’ and ‘good.’ No one would be judged for having sex with their husband, while they might be judged for having sex with a man they have just met. If we throw out the idea that sex within marriage is the only ‘right’ kind of sex, marriage loses one of its biggest incentives.

The breaks are put on sexual libertarianism when it seems to infringe on two things to which we cling dearly – the ideas of love and marriage. Sex belongs with love, and love belongs with marriage, end of story. The idea that sex does *not* have to be connected with love or marriage scares the daylights out of most people.

The strongest point for sexual libertarianism lies in the idea that sex is a private matter: “Whatever goes on between consenting adults in private is nobody’s business but their own, and that hold as much for sex as for anything else.” (Barry, 83) Nobody would be scolded for having a couple to their home for dinner, so why should they be judged for having that same couple over for a threesome? No one would care if a girl went and grabbed a cup of coffee with three different men in one week, but imagine what would be said if that same girl had sex with three different men in one week. Why would we care? Nothing in either situation has any affect on any person’s life other than those involved. What happens in someone’s bedroom (or kitchen or living room or terrace for that matter) is nobody else’s business.

There also seems to be a blatant misinterpretation in the understanding of what sexual libertarianism is. Sexual libertarianism calls for people to look at sex in a way they are not used to: “As long as the act involves no dishonesty, exploitation, or coercion, and as long as it does not violate any obligations to others, it is not immoral.” (Barry, 78) In the libertarian view, premarital sex, threesomes, swinging and promiscuity are not immoral. The part most people seem to miss

is that just because it is allowed does not mean one must do it. Having a threesome is on the table, one can choose to engage in the threesome or walk away. Sexual libertarians are not forcing people to engage in sexual acts they are not comfortable with; they are simply allowing said situations to exist in a judgment-free environment. Premarital sex is out there and deemed moral, so either go for it, or don’t. This freedom from repression still leaves the option to wait until marriage, or until they are in love, or whatever their conditions are, if that is what they choose. All sexual libertarians are saying is that the options are out there, and those options are not bad, do with them what you will.

Sexual libertarianism requires us all to take a step away from ourselves and look at sex in a new light. A light where there are so many more acceptable options beyond sex within marriage. It requires us to look at sex *qua* sex, sex simply as an activity comparable with getting a cup of coffee, and more than anything else, to look at sex in a deeply personal way. Insofar as every individual has the option to engage in any sexual act (as long as it meets the criteria described earlier, that it cannot involve dishonesty, exploitation, or coercion), it is each individual’s personal and private choice and encounter. Libertarians simply strive to eliminate the man-made constrictions that smother our sexuality. Once one is freed, it is entirely up to that individual to decide what is right for them. Insofar as we are all in control of our own sexual experiences, it seems that the only threat is towards those who would wish to control our sexuality. Sexual libertarianism makes us ask ourselves *if* and *why* we would want someone else controlling our sexuality, and if we want the control back, it makes us decide what we are willing to lay by the wayside to get it.

Bibliography

Barry, Vincent, Jeffrey Olen and Julie C. VanCamp,
Applying Ethics. Thompson Wadsworth, 2008.

PHILOSOPHY ESSAY CONTEXT 2008-2009: WINNING ESSAYS

1st Place: ARTHUR OBERHEIM Toward an Understanding of DNR Orders Fall 2008, Medical Ethics, PHL 218

In a perfect world, under ideal circumstances, the patient, alone, should be the ultimate arbiter of decisions involving the end of his life. That does not mean that the individual makes end-of-life decisions in a vacuum, but, as I will try to argue, if the patient so chooses, she has that very right. Conceding that we do not live in a perfect world where ethical decisions are clear, I will attempt to argue that as an autonomous being, everyone has a perfect duty to himself to specify DNR orders and advance directives that, once articulated, are immutable, regardless of the challenges posed to the healthcare system, its employees and their value systems. Though I will rely on deontology for the basis of my argument, I will also argue that a greater good is served in honoring a person’s end-of-life wishes, even when, perhaps especially when, those wishes run counter to a healthcare worker’s own ethics.

Since 1991, at least in the United States, all patients admitted to the hospital must specify whether they have any advance directives or do not resuscitate (DNR) orders. (Baumrucker, 62) This policy was put in place to counter the paternalism that, still, characterizes healthcare. Further, an “institutional momentum” tends to take in people and give them special status as “patients,” a term that is losing traction in favor of an equally problematic term, “clients.” This is not simply a rebranding or a semantic change. The label alters the perceived rights of the person in the hospital bed, and yet, in everyday life autonomy is a Kantian notion embedded in the American psyche and ethos, where Americans, in particular, hold as sacred “individuality, self-definition, self reliance, independence, and liberty.” (Shirley, 15) Here, then, people have a duty to themselves, where the right to choose freely is central to identity. The difficulty comes, then, when people are no longer treated as such but become “patients,” whose rights become subject to and limited by the institutions housing them. This relationship between patient and institution is inherently paternalistic, for many reasons that make some sense: many come into the healthcare system ignorant of how the system itself works, or they are ignorant of health and illness, or they do not know or do not understand the pathogenesis and prognosis of diseases, and, they are ill. Of course, anyone entering even a

doctor's office for a routine visit knows the pull of paternalism, and the cooperation that, to an extent, is expected. Cooperation, however, isn't submission, and one does not surrender one's rights at the threshold of the institution, no matter how intimidated one feels. One question, then, is where individuals find their right to autonomy. The Declaration of Independence articulates the fundamental principles of "Life, Liberty and the pursuit of Happiness" (ushistory.org), and because those rights extend to "all men," in spirit and intention, the Declaration extends those rights to each and every individual. It is perhaps fitting, then, that 200 years later, in the 1976 case of *Karen Ann Quinlan v. New Jersey*, the watershed case establishing the legal precedent for DNR orders, the ruling outlined that a patient has an inherent "right to refuse resuscitative measures. This is usually accomplished by the use of the DNR order." (Eckberg, 1998) With this ruling, patient autonomy became the *de jure*, though not *de facto*, ethical principle guiding end-of-life decisions.

Having briefly outlined the basis of individual autonomy in America, it is important to place the autonomy in the context of the healthcare setting because patient wishes often conflict with the perceived and real ethical duties of physicians, nurses and family members. First, a patient would be prudent to consult with his physician to fully understand his diseases, the pathogenesis of his diseases, as well as his prognosis; certainly, long before the onset of any illness, all people should consult with their own physicians to begin to answer the many questions that must be answered in order to clearly articulate advance directives and a DNR order; however, people are not making medical decisions about advance directives and DNR orders only, they are making emotional, ethical and spiritual decisions. Because by their very nature of the decisions about the end of life are not, primarily, medical, they must fall within the purview of the patient's control.

To fully understand a person's right to autonomously make end of life decisions, we need to consider those decisions in the context of physicians, nurses and the person herself, for once people become patients, part of the healthcare system, their own moral principles and identities, often, come into conflict with and are subsumed by the very people who, ostensibly, also want the "best" for the patient. Physicians are bound by four ethical principles involving all decisions regarding their patients, especially DNR considerations, the first of which "is non-maleficence, epitomized by the Hippocratic dictum to 'first do no harm.'" (Margolis, McGrath, Kussin, & Schwinn, 806) Further, "The principle of non-maleficence requires HCPs [healthcare professionals] to prevent and/or minimize harms whenever possible... A harm is more than a physical injury but can also be a damage to a person's psychological state, spiritual

well-being, and/or life goals." (DeWolf Bosek, Ring, & Cady, 22) This first principle explicitly outlines the ethical duty of a physician to – first and foremost – do no harm. In a purely Kantian sense, this first principle is consonant with a patient's DNR order and advance directive, both of which articulate the patient's express desire to, in effect, do no harm by taking no action at all. Some have argued that the reasons for DNR orders are not always clear, and because of that, they lack moral merit for patient and doctor alike. They include medical reasons that have at least a surface validity, including "multisystem failure, severe brain injury, cardio-pulmonary collapse, increased age, severity of illness, poor health in the past, known malignancy, origin of admission, and poor admission prognosis" (Thibault-Prevost, Jensen, & Hodgins, 260), and yet, "validity" here gains its strength from a physician's sanction and the physician's value system, formed by years spent within the healthcare system that is, by its nature, predisposed to treating a patient, regardless of what the patient may, or may not wish. In essence, by doing no harm, the physician has been encouraged by his oath to take time to consult with the patient or the patient's healthcare proxies to understand their ethical values. However, when physicians take action by reflexively treating their patients, they are setting aside the primacy of the "first do no harm" principle and in the process undermining the patient's right to autonomy, as well as undermining their own duty to their Hippocratic oath and their patients. Distressingly and despite patients wanting to talk to their doctors about their condition and their prognosis and, further, how they want their end-of-life care to be handled, in a survey of 1000 seriously ill patients, only 25% discussed CPR with their physicians. (Cherniack, 303) How then can physicians know, with any certainty, what a patient wants, if, in a medical irony, the physician's purported duty to treat is neither informed by nor consented to by the patient? The only answer to this question is the answer of institutional paternalism, where, without consultation with the patient, the physician knows best. To fully satisfy the duty of doing no harm, the physician must be the one who initiates ongoing conversations about end-of-life decisions with patients. Without continual conversations, when the time comes to execute a DNR order or to override it, the best any physician can hope for is morality by accident, and that's hardly acceptable.

For physicians, the second ethical principle is "beneficence, or to perform a good, moral act for the patient" (Margolis, McGrath, Kussin, & Schwinn, 806), an overtly Utilitarian principle predicated on action. Here again, "good, moral act" needs discussion and definition. By training, physicians have learned to define both good and moral to be limited to treating patients to cure them of their diseases, not the holistic physical,

emotional and spiritual good of the patient. However, making a decision to honor a DNR order or advance directive is the performance of a good, moral act that does respect the right of the patient as a whole. By being true to this principle in this way, the physician honors his duty to his patient while also respecting the patient's autonomy. Beyond the strict Kantian argument here, if a physician learns to determine what a good, moral act is "for the patient," then he's guaranteeing satisfaction of a greater good, "for the patient."

The third principle governing physician action is the principle of patient autonomy, which has emerged as a predominant right in ethical medical decision making, and it is, as I have been arguing, the principle that does, indeed, trump all other ethical principles because, by default, it helps to place the decisions regarding end-of-life firmly with the patient. Some have argued that too much emphasis has been placed on individual autonomy, which stands, perhaps, in conflict with "mutual obligation, influence, and care." (Shirley, 15) There is no doubt that end-of-life decisions such as advance directives and DNR orders are not only difficult for patients, but family and caregivers as well. In a deontological sense, the question is whether the patient has a duty to self alone or to others. The answer, I think, is that one's life is one's life and that no one should be compelled or coerced by the universal certainty of death into giving up his morals.

Two conditions outline the difficulty of moral decision-making when it comes to the end of one's life: pain and dementia. (Cherniack, 304) To begin with pain, people who anticipate chronic and unbearable pain are more likely to exercise DNR orders and to articulate advance directives than those who do not consider pain as a likely consequence of CPR. In consultation with healthcare staff, and others, the patient has the right to assess his own willingness and capacity to deal with pain. In healthcare, we have finally come to understand that no truly objective measure of pain yet exists and it is therefore unethical to stand in judgment of a particular patient's experience of and tolerance for pain. We have a duty, then, to treat the pain a patient feels as he individually experiences it, but this understanding has taken a long time to gain acceptance. While it is true that some patients may be drug seekers and lie about their pain, the healthcare industry has decided that, in this instance, it is far better to first treat the pain and later assess the veracity of the claims of pain only when there's reason to suspect abuse of a patient's right to be treated. Healthcare has taken this duty so seriously that pain has been elevated in status to "The Fifth Vital Sign." In this case, we are willing to trust in the integrity of the patient's ability to assess his own pain, because he has that right. I suggest that we extend to patients the same respect for end-of-life decisions because just as they

know their own threshold of pain tolerance, they understand best their own values.

Just as people who anticipate pain tend to choose a DNR order, anticipation of dementia leads people to outline specific advance directives related to mental status. Family members and healthcare proxies may experience emotional pain and an ethical dilemma when a loved one makes a decision to not be resuscitated when dementia is a certain outcome. However, that person's right to articulate her values far outweighs any perceived right or duty anyone else might possess. For some, for most perhaps, the life of the mind is life itself. One might make a Utilitarian argument that the one single person choosing a DNR order will suffer far less than all those combined who love and care for that person, and therefore, the ethical choice is to prolong the life for the benefit of others, but that argument deprives people of their autonomy and therefore their individuality. In this case, the generous sacrifice of the many is consistent with the dire need of the one to possess her sense of self at, perhaps, the most delicate point in her life.

The fourth principle is distributive justice which allows society to provide medical resources "to those best able to benefit from them." (Margolis, McGrath, Kussin, & Schwinn, 806) The distributive justice principle gives rise to concerns of DNRs given for the wrong, and nonmedical reasons, which include, "Shortage of critical care beds, length of hospital stay, cost containment of health care dollars, and risk of legal complications." (Thibault-Prevost, Jensen, & Hodgins, 260) Here, the physician's duty is clear and consistent with his duties outlined by the first three principles regarding his patient. The good, moral act is to prevent harm to be visited upon the patient by the machinations of the institutions caring for them, and, thereby, ensure patient autonomy to the last. If the concern is that medical resources will not be meted out justly, a DNR order is, by definition, conserving resources, which, as already said, is one of the fears of the DNR order. However, also as already argued above, a physician has no greater duty to his patient than to honor and protect end-of-life decisions. It's not only an argument founded in the duty of the physician and the intentions of the Declaration of Independence, and thus built on a Kantian foundation, it is providing the greatest good to the only person who matters, the person trying to make the best decision based around the circumstances of his death.

Besides physicians, nurses find themselves in perhaps a more difficult ethical dilemma because they occupy that middle ground between the physician and patient and between the family and patient. As nursing has grown into a profession, it has filled the niche in the no woman's land between doctor and patient, where nurses must "act always in such as manner as to promote and safeguard the interests and wellbeing of patients..."

[and] recognize and respect the uniqueness and dignity of each patient.” (Jevon, 1999) Far more than physicians, nurses focus their efforts on patient care; indeed, that is nursing. It is not the treatment of disease, but the holistic care of the patient. And yet, nurses are left out of the decision making process and only the physician can write the DNR order; however, nurses “had close contact with patients and families, and were the ones to initiate resuscitation attempts.” (Thibault-Prevost, Jensen, & Hodgins, 261) Since nurses have the closest contact with patients and since their duty is to patient autonomy, nurses have a most intimate knowledge of patients’ desires. Yet, with physicians writing the orders, the nurse is left with the weighty moral duty of seeking out the physician to advocate for the patient, without sanctioned access to input. (Thibault-Prevost, Jensen, & Hodgins, 259)

One of the objections to DNR orders stems from the nurse-patient relationship, where the danger for the nurse is to avoid exerting political will/power upon the patient, or using the acquisition of power in an inappropriate way (Shirley, 18), and there are no formal checks and balances to this, except the integrity of the nurse, and the others caring for the patient. However, with the inherent paternalism and the tendency of healthcare institutions to look after themselves first (Shirley, 18), by doing her duty in advocating for a patient, a nurse honors the principle of patient autonomy.

There are many valid criticisms of DNR orders and advance directives, but, as I hope to show, though they have ethical import, they do not eclipse a patient’s right to autonomy and the HCP’s duty to support patient autonomy. One criticism is that in spite of trying to bring order and consistency to DNRs, “the policies in many hospitals are still informal and even idiosyncratic.” (Skerrit & Pitt, 667) Some claim that DNR orders are also too vague, and therefore open to interpretation. (Eckberg, 1998) This criticism is a function of a lack of attention to clarifying DNR protocols, and not a substantial ethical criticism. The answer, though, is not to deprive a patient of his rights, but to fix the institutional problems that prohibit the free exercise of patient rights. As for the desire for clarity of language, that is understandable and weighty; however, language is ambiguous by nature, and prudent judgment is always demanded of healthcare professionals.

Another argument against autonomy articulates the well-founded point that it “does not help us account for or negotiate the duties, obligations, and needs of those who are not the identified patient.” (Shirley, 20) She goes on to say, “However, it leaves us with few ways to evaluate the worth of those relationships.” The point here is not that “we,” the people giving care, evaluate the network of relationships that admittedly help to form the very identity of the patient, but

that we help the patient in our care to consider the importance and implications of that network of people in making decisions. That’s the duty of the healthcare professional. It allows for the patient to retain autonomy. None of this is to say that relationships do not matter, but to avoid oppressive paternalism, HCPs need to trust their patients to make their own best decisions. It is a leap of faith, perhaps, but a greater good is served by honoring the decisions of the informed individual.

There are two last considerations for which I confess I do not have a satisfying answer. As one physician-researcher said, “We’re asking patients to decide with certainty what they will want when an unknown future event occurs at an unknown time under unknown circumstances.” (Baumrucker, 62) Values are not immutable and what is perceived to be true is real and often transitory. Again and again, people find that what they imagine to be true is not. We cannot know the future, not even our future selves. We do not know, for sure, if dementia, say, offers some solace once a person is no longer oriented to time and place. We just don’t know, for sure. While I tend to hold that people underestimate their capacity to adapt, I maintain, hesitantly, that patient autonomy surpasses all considerations. Patients have a right, however difficult it might be to understand, to be wrong about their decisions, even decisions involving end-of-life. There is what is called the Ulysses clause, modeled after the Homeric poem (DeWolf Bosek, Ring, & Cady, 22-23), where Ulysses orders his crew to bind him to the mast so that he can hear the Siren song; but no matter what he says and no matter how the circumstances change, his crew is not to set him free until they have passed the Sirens and they are collectively safe. It’s a provocative analogy for my argument. As captain, Ulysses has a duty to ensure the safety of his crew, which he satisfies, and he has a right to hear the Siren song as an autonomous being. His crew, no matter what Ulysses suffers, has a duty to follow his orders so long as they are not in jeopardy. Literature is not life, certainly, but epics serve a didactic purpose, and they often lead us to understand a higher Truth, like duty and rights.

The final question specifically speaks to the ethical dilemma of people who find themselves to have limited mental status and who are, therefore, unable to function autonomously and articulate their end-of-life wishes. (Shirley, 20) What is the right action then? I have but a provisional answer. If patients are truly allowed to be autonomous people, with all the rights and responsibilities attending to that role, perhaps, then, paternalism does have a role. Already, teachers act in the role of in loco parentis in schools, nurses advocate for patients, and so, in only the very special cases where proxies have not been nominated or have been found to be acting unethically, only then should HCPs rely upon paternalism, where the team

caring for that person meets to formulate advance directives and DNR orders that are consonant with the intentions, as best as they are known, of the person in their care. Sometimes, as the only people left in a person’s life providing care, the final duty the team can perform is to do all they can to ensure that the integrity of the person remains intact.

Perhaps it is uniquely American to consider autonomy a sacred right, and perhaps, putting such value on autonomy harms families, but the balance of one’s life is spent, for the vast majority of people, in balancing the needs of the many against the needs of the self. As mentioned above, once people enter the healthcare system, something is lost even in the best of circumstances. Try as professionals might to insert humanity and compassion into the system, it is a dehumanizing machinery. Compensation for all that is necessary to provide the balance a human being needs to make dignified decisions about DNRs and advance directives, and for those of us in healthcare, we are duty bound to honor them.

Bibliography

- Baumrucker, S. J. “Ethics roundtable.” *American Journal of Hospice and Palliative Medicine*, 23 (2006), 59-64.
- Cherniack, E. P. “Increasing use of DNR orders in the elderly worldwide: Whose choice is it?” *Journal of Medical Ethics*, 28 (2002), 303-307.
- DeWolf Bosek, M. S., Ring, M. E., & Cady, R. F. “Do psychiatric advance directives protect autonomy?” *JONA’S Healthcare, Law, Ethics, and Regulation*, 10 (2008), 17-25.
- Eckberg, E. “The continuing ethical dilemma of the do-not-resuscitate order.” *Association for PeriOperative Registered Nurses*, 67 (1998), 783-790.
- Jevon, P. “Do not resuscitate orders: The issues.” *Nursing Standard*, 13 (1999), 45-46.
- Margolis, J.O., McGrath, B. J., Kussin, P. S., & Schwinn, D. A. “Do not resuscitate (DNR) orders during surgery: Ethical foundations for institutional policies in the United States.” *Anesthesia and Analgesia*, 80 (1995), 806-809.
- Shirley, J. L. “Limits of autonomy in nursing’s moral discourse.” *Advances in Nursing Science*, 30 (2007), 14-25.
- Skerrit, U., & Pitt, B. “‘Do not resuscitate’: How? why? and when?” *International Journal of Geriatric Psychiatry*, 12 (1997), 667-670.
- The Declaration of Independence*. Retrieved on 30 November 2008 from The Declaration of Independence: <http://www.ushistory.org/Declaration/document/index.htm>
- Thibault-Prevost, J., Jensen, L. A., & Hodgins, M. “Critical care nurses’ perceptions of DNR.” *Journal of Nursing Scholarship*, 32 (2000), 259-265.

Professor’s Comment

The central focus of Arthur Oberheim’s paper is to discuss the moral foundations of advanced directives and DNR orders. His argument is original, attentive to alternative approaches, charitable in its treatment of criticisms, and is persuasive. What is interesting about his approach is that Oberheim argues that the moral foundation of respect for patients’ end-of-life decisions is grounded on the idea that each person ‘has a perfect duty to himself to specify DNR orders and advanced directives.’ This is a thoroughly Kantian approach to the problem which sources all moral value in the autonomy of the human individual. Yet, Oberheim also takes pains to show that his conclusion is further supported by an appeal to social utility.

One of the reasons that the health professions have an obligation to respect such decisions is, as Oberheim notes, a result of the fact that such decisions are not themselves, in the first instance, medical decisions. Individuals specify advanced directives and DNRs prior to the time when they become patients, and as such these decisions are recognized to be emotional, ethical and spiritual decisions about medical care, but are not themselves decisions regarding medical treatment options. Hence, argues Oberheim, such decisions must ‘fall within the purview of the patient’s control.’

After articulating the general argument, Oberheim proceeds to detail how such a respect for DNRs and advanced directives can be commensurate with other ethical duties applying to physicians. For example he argues that the principle of non-maleficence and the principle of beneficence, when understood correctly to include not only physical, but also psychological and moral harm and goods, would mean that DNRs and advanced directives be respected; since to violate a patient’s right to make autonomous decisions about the course of his own medical treatment does more harm to the patient than does the alternative. Oberheim concludes with a discussion of the practical issues involved in instituting the moral case he has made. – *Dr. Michael Mulnix*

2nd Place: CAILIN MCFARLAND Indirect and Direct Realism: An Examination of Perceptual Knowledge Fall 2008, Philosophy 315, Reality and Knowledge

Introduction

As human beings we are equipped with certain faculties that help us to make sense of the external material world. It is a necessary for our survival as a species that we be able to develop a relationship with the world. To do this we must employ what

faculties we have been given to formulate ideas or conceptions of how the material world seems to us. From these conceptions we can orient ourselves in the world and direct ourselves within it.

Because our ability to survive is dependent on our ability to formulate ideas and understandings of the world, we should examine the methods by which we formulate these ideas and understandings. In other words, we should understand how it is we are coming to understand the world. “A great deal of our knowledge of the world is gained via perception - that is, via our sensory faculties such as our sense of sight, hearing, touch, and so forth.” (Pritchard, 78) Our senses connect us with the world. They are faculties that we depend on heavily in order to observe the external material world, formulate ideas about it, and create an understanding of it. The understanding created via this method is called “perceptual knowledge.”

This paper will examine perceptual knowledge. Using the argument from illusion, I will explain the problem of perceptual knowledge, which causes us to question how trustworthy the knowledge we form via this method truly is. I will explain how the argument from illusion supports the idea that our relationship with the material world is indirect, as is described in the theory of indirect realism. Using examples from John Locke, I will support the idea that our relationship with the material world is an indirect one and will also examine the problems indirect realism presents. From there I will examine the theory of direct realism in contrast to indirect realism. I will identify problems with direct realism and argue that they serve to promote indirect realism as a stronger theory for understanding perceptual knowledge.

Perceptual Knowledge and its Problem

As was discussed above, humans depend on the use of their sensing faculties to perceive the world. From these perceptions we formulate an understanding of the world that helps us exist within it. The question then becomes, “what about our perceptual knowledge would cause us to question our relationship with the material world?” In other words, is there any reason to doubt that perceptual knowledge is capable of presenting us with a trustworthy understanding of the material world? Is the knowledge that we formulate via perception reliable?

The general consensus among philosophers is that there is reason to doubt perceptual knowledge. The reasons supporting this conclusion are best explained using the argument from illusion. The argument from illusion says that our perceptions can be misleading, that they are not always presenting us with an accurate account of the external material world. “This very widely advocated argument...appeals to the immense variety of cases in which one or more of the following conditions obtain:

(i) what is immediately perceived or given has different qualities from different perspectives or under different perceptual conditions, even though the relevant physical object does not change (perceptual relativity); (ii) qualities are immediately experienced that the relevant object clearly does not possess (illusion); or (iii) qualities are experienced in a situation in which there is no physical object of the relevant sort present at all — and so obviously none that has those qualities (hallucination).” (Bonjour, 2007)

This argument highlights that our perception is in some ways fallible. This fallibility suggests that our relationship to the external material world might not be what we once thought it was. Intuitively it is easy to think that our sense perceptions are putting us in touch with the actual external material world. But what the argument from illusion reveals is that our senses clearly are not always capable of giving us an accurate account of the external material world and in that sense they are not always in touch with the external material world as it really is. So then what is our relationship to the world?

Indirect Realism

One explanation of our relationship to the external material world that takes into account the fallibility of our sense perception is the theory of indirect realism. According to this theory what our senses present to us is not the actual external material world but rather an impression of it. The actual external material world acts as a stimulus to our senses and our senses in turn react to that stimulus by producing an impression or reflection of the external material world for us to interpret. From the impression of the world our senses present to us, we infer how the world really is. This makes our relationship to the external material world indirect and subjective. “Our subjective sensory experience (and the beliefs that we adopt on the basis of it) constitute a representation of the external material world, one that is caused by that world and that we are justified, on the basis of something like a causal or explanatory inference, in thinking to be at least approximately accurate.” (Bonjour, 2007)

Indirect realism supports the idea that there is a distinction between the external material world and the subjective sensory experience of human beings. To better understand this distinction, we can make use of a theory of primary and secondary qualities of an object that was developed by the philosopher John Locke. “The primary qualities of an object are properties which the object possesses independent of us — such as occupying space, being either in motion or at rest, having solidity and texture. The secondary qualities are powers in bodies to produce ideas in us like color, taste, smell and so on that are caused by the interaction of our particular perceptual apparatus with the primary qualities of the object. Our ideas

of primary qualities resemble the qualities in the object, while our ideas of secondary qualities do not resemble the powers that cause them.” (Uzgalis, 2007)

In this sense then we can account for the seeming subjectivity of our sensory experience by understanding that different people will formulate different impressions of the secondary qualities of an external material object according to their particular perceptual faculties. This at least accounts partly for why people are susceptible to the perceptual relativity, illusory, and hallucinatory aspects of the argument from illusion. But a problem still remains in that sometimes we think we perceive something in the external material world that actually has no counterpart. In other words we may hallucinate by forming a sense perception that cannot be linked to a stimulus in the external material world at all.

In thinking about this problem we can come to understand why an indirect relationship, wherein we can only make inferences about the external material world, creates the possibility that we could never know what the actual external material world is like. “This point is exacerbated once one considers the possibility that the way the world appears and the way that it really is could be drastically different on this view.” (Pritchard, 81)

A great example to illustrate more clearly the problem of indirect realism encounters according to the distinction it sets up between the actual external material world and our ability to infer ideas about the way that world really is through our sense perception is the movie *The Matrix*. The movie’s main character Neo is searching for something. What it is he is not exactly sure. But Neo has a feeling that something is not quite right. He eventually makes contact with a man named “Morpheus” who offers him the opportunity to discover a hidden truth about his life. After swallowing a pill, Neo emerges naked from a tub full of pink liquid with strange sockets all over his body. Neo had been “living” in what we come to understand as the Matrix, a completely deceptive reality. In actual reality his body was being used to generate energy for a robotic civilization that had dominated the human race. The robots created the Matrix to trick and control the minds of the people they were essentially harvesting.

So according to indirect realism our conceptions of reality are only as good as the inferences we draw from our sense perception. But as we have seen, the very fact that we can only make an inference about the world suggests that we may never know what the actual external material world is really like. The inference is always based on our sense perception and our sense perception is fallible. It is possible, according to indirect realism, that we are living a completely deceived life, that our inferences about how the external material world is are wrong. Therefore,

our perceptions may in fact be grounded in a fictional world — a Matrix.

Direct Realism

Clearly indirect realism has presented us with some pretty amazing problems. Who in their right mind would believe that everything we take to be the reality of the external material world is nothing more than a clever deception? That it is possible according to indirect realism that we could know nothing about the external material world has led many to reject the theory altogether. Instead of thinking that our relationship to the external material world is indirect, the theory of direct realism argues that our sense perception can provide us with a direct relationship.

Direct realism asserts that there are instances when we are not being deceived, not suffering from any of the aspects of the argument from illusion, and that during those instances we are directly aware, or are directly experiencing, the actual external material world. “The idea is that although it is true that in deceived cases...I am not directly aware of the world but only with the way the world appears, this should not be thought to entail that in non-deceived cases...I am not directly acquainted with objects in the world. On this view, the fact that I am not always able to distinguish between deceived and non-deceived cases is neither here nor there, since it is not held to be a precondition of perceptual knowledge that one can tell the genuine cases of perceptual knowledge apart from the merely apparent cases.” (Pritchard, 85)

Direct realism is appealing because intuitively most human beings do not believe that their sense perceptions are constantly deceiving them. Humans tend to believe that in most cases their perceptual knowledge of the world does inform them of the way the world really is. Who really wants to accept the notion that we could quite possibly be trapped within some mental matrix that divides us from true reality? That direct realism appeals more to our common sense and hope that we are not being deceived about our reality enhances its plausibility.

However, direct realism doesn’t solve the problems introduced via the argument from illusion. According to direct realism, just as we should allow that there are instances in which we are not being deceived and therefore can trust in having direct knowledge of the external material world, we have to also accept that there are instances in which we are being deceived. In those cases direct realism has not shown how it is that we would be able to maintain a direct way of forming perceptual knowledge. Without doing so it can’t maintain its argument that we are always in direct contact with the external, material world. Also, what good is it to us to know that when we are not being deceived we have direct knowledge of the external

material world if we are not able to distinguish deceived from non-deceived cases?

There still remains an issue with direct realism as to how we are justified in forming our beliefs about the world. Direct realism changes the character of our sensory perception in relation to the external material world. Instead of our senses creating an impression of the world from which we infer an idea of how the world is, in non-deceived cases we arrive at that idea from directly experiencing the world. But direct realism still has yet to prove how we are justified in forming our beliefs about the world via the idea of the world given to us directly. "Thus while [direct realism] may present a somewhat more accurate picture of the perceiver's state of mind, the view that results seems to still be fundamentally a version of [indirect] realism in that it faces the same essential problem of justifying the transition (whether it is an explicit inference or not) from the character of the person's experience to beliefs or judgments about the material world." (Bonjour, 2007)

Conclusion

We have come to understand that perceptual knowledge calls into question the ability of our sensing faculties to provide for us an accurate account of the external material world from which we can formulate knowledge about how the world really is. The argument from illusion helped illustrate that there are certain aspects of our sense perception that are fallible. This caused us to question what our relationship to the external material world was. The theory of indirect realism suggested that our senses operate to provide us with an impression of the external material world that is stimulated from the actual external material world. From these impressions, we can make inferences about how that world really is and in that way we can come to know it. This theory, however, also accepts the fallibility of our sense perception, which leaves open the possibility that we know nothing of the external material world and are severed from it altogether. It is possible we are living in a Matrix of sorts.

Direct realism sought to counter the amazing problems indirect realism left us with by asserting that there are times when our sense perception is not misleading and that during those times we are directly experiencing the external material world as it really is. Perhaps in this way direct realism sought to avoid some of the problems created by the argument from illusion, but as we saw direct realism still accepts that there are instances when we are deceived by our senses. Furthermore, direct realism suggests that we do not need to be able to distinguish between deceived and non-deceived cases, and this in turn leads us to question the utility of the theory in that we

don't know when we are experiencing a direct relationship with the external material world.

Bibliography

BonJour, Laurence, "Epistemological Problems of Perception," (Stanford Encyclopedia of Philosophy), 5 May 2007, < <http://plato.stanford.edu/entries/perception-episprob/>>

Pritchard, Duncan, *What is this thing called knowledge?*, London and New York: Routledge, 2006.

Uzgalis, William, "John Locke," (Stanford Encyclopedia of Philosophy), 5 May 2007, <<http://plato.stanford.edu/entries/locke/>>

Professor's comment

Each of us knows about perception firsthand, but a little reflection reveals how poorly we understand its nature. The average person takes the naïve (but not necessarily wrong) view that we have direct perceptual contact with everyday, mind-independent objects and events. What could be more intuitive than thinking that we can look around and see a floor, a wall, a cloud, or another person? Indeed, confidence in having direct perceptual access to our surroundings is why we often hear expressions such as that seeing is believing or that the eyes are windows to the world. Philosophers call this theory "direct realism": "Direct," because our perceptual access to the world is unmediated, and "realism," because the world that we perceive exists independently of the mind.

Yet, at least since the time of the ancient Greeks, thoughtful people have recognized that there is a crucial distinction between appearances and reality and that things are not always as they seem. Reflecting upon the implications of dreams, hallucinations, optical illusions, and even sensations of temperature and color has led many philosophers to wonder whether what we directly perceive are ideas or sensations that may (as in, we hope, normal cases of perception) or may not (as in dreams) truly represent or be grounded in a reality that we cannot directly perceive. According to this theory, our perceptual access to the external world is indirect and mediated by ideas, sensations, mental representations, or some such mental entities. This view is known as "indirect realism."

An appealing feature of indirect realism is that by positing the existence of potentially misleading mental representations or appearances, the theory can explain why a straight rod submerged halfway in water may look bent or why dreaming can seem indistinguishable from wakefulness. Yet, indirect realism seems to undermine our assurance in the reality of a mind-independent world that is as it appears to be. If all that a person can directly perceive are certain mental states, how could

that person say with any confidence what the world "behind" or supposedly represented by those appearances would be like? Indirect realism may seem to deconstruct itself and leave behind skepticism about the existence of a mind-independent world that is as it appears.

Although direct and indirect realism are not the only philosophical theories of perception, they long have been two of the leading contenders. In her essay written for my

Reality and Knowledge course (PHL315) in fall 2008, Cailin McFarland champions indirect realism, but she acknowledges that direct realism is not without its appeal. Her paper excels not only for its sensitive treatment of complex issues but also for its admirable humility in the face of questions with no easy answers.

– Dr. William Cornwell

STUDENT ART

Hilary Hebert: *Mechanical Flight*

"Ludwig Wittgenstein's duck-rabbit picture is an image which can be seen in two different perspectives, similar to my piece. In my illustration, there is a large round face grinning at the viewer, but if one shifts one's focus, the image then becomes a bird holding a worm. If one studies the shape which the worm is positioned in, the viewer can also see that it is in the shape of a question mark: the body is the curved part of the symbol and the head is the punctuation mark. This piece was not entirely meant to be viewed in multiple ways, but once I realized I had made the face in the bird I decided that the worm could be a third way of seeing the picture: the observer is directly and visually confronted *with what it is that they are seeing.*"

– The artist



Amy Alcorn: *Four Platonic Impressions of the Philosopher's Journey*

The quartet of astonishing photographic images is meant to represent Plato's Myth of the Cave. I was deeply impressed by Amy's photographic skills, the depth and symbolic power of her art. Perhaps the most fascinating aspect of her work has to do with her ability to provoke experiences of transcendence. Amy entices the viewer into her own point of view and then imperceptibly immerses the viewer directly into the visible. The viewer forgets about him/herself and becomes a pure act of contemplation. It occurred to me that Amy's photography can be used to effectively tell the story of the painstaking ascent of the mind of the philosopher king from the symbolic darkness of the cave to the heights of divine illumination. The universal message of Plato's Myth – elevation of the mind, peeling off of cognitive illusions, the pursuit of cognitive purity, and the blindness of absolute cognitive purity – is embodied in Amy's mesmerizing photographs. Isn't it ironic that artistic imagery (which Plato so much supposedly abhorred) can sometimes express philosophical ideas better than spoken or written words! I owe Amy for making me *see* into the mind of one of philosophy's greatest thinkers.

– Dr. Severin Kitanov



Impression # 1: *De profundis*



Amy Alcorn: Impression # 2: *Recollecting the forms*



Impression # 3: *Reaching into eternity*



Amy Alcorn: Impression # 4: *Awaiting the Overture of Being, Truth, and Goodness*

Educating you for life

Michael Boroda: *Occam's Racer*

William of Ockham (Occam) was a 14th-century British theologian, philosopher, and logician. His name is commonly associated with the Principle of Parsimony – also known as “Ockham’s Razor.” One of the standard formulations of the principle states: “Plurality is never to be posited without necessity.” Ockham used this principle in both his theology and philosophy. In the realm of natural philosophy, for instance, Ockham used the principle to argue that the matter of the planets must not be any different from the matter that composes all things in the sub-lunar world (i.e. the region of planet Earth). In his theology, Ockham employed the principle to argue that angels and demons cannot know *what* humans are thinking about; they can only know *that* humans are thinking about something. Michael Boroda’s comic illustration successfully conveys the experience of rigorous application of “Ockham’s Razor.” Imagine that you are a scientist and you want to determine which of two alternative hypothesis offers the better account of one and same phenomenon. Ockham’s principle alone suggests that you should opt for the simpler hypothesis. Any reasonable person would say that simpler is not always better. But if it were true that simpler is always better, then one should be able to *cruise* through various scientific hypotheses without fear of eliminating unnecessary complexity.

– Dr. Severin Kitanov



Beth Rheume: *No words*

