

Paternalism

PPE 101

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- Poverty & Paternalism (Esther Duflo)
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Paternalism

Paternalism

Paternalism: An action, intervention, or policy that restricts someone's **autonomy** for **their own good**.

Example:



Hiding the sugary cookies from your toddler.



Drug laws and seatbelt laws.

Paternalism versus Autonomy

Esther Duflo articulating the worry:



As such, paternalism seems to be in direct conflict with freedom: whether in the form of strings attached to a transfer or a legislated mandate, **paternalism takes away an individual's right to choose**. For the critics, that is its biggest flaw: it overrides an individual's agency on the grounds that those in power (the boss, the white man, the nanny state, for example) know better. Why should adults not have the ability to decide freely what is good for themselves? Some mandates may be

Paternalism versus Autonomy

Esther Duflo ultimately disagrees.



Paternalistic interventions can actually promote *meaningful freedom*.

between paternalism and freedom: **once we define freedom properly, could it be that the case that having some basic decisions taken care of our behalf makes us more free, rather than less free?** Does this imply that there is an "acceptable" (e.g. freedom enhancing) paternalism, and where do we place the boundary between acceptable and unacceptable?

Paternalism versus Autonomy

Esther Duflo ultimately disagrees.

Paternalistic interventions can actually promote *meaningful freedom*.



far. **A policy that aims to make it easier and more automatic to acquire the basic elements of a healthy and productive life through better infrastructure, carefully designed defaults, or even, on occasion, prescriptions (when they can be enforced), promotes meaningful freedom.**

Freedom & Autonomy

Negative Freedom

Freedom from interference
(e.g., Nozick)



Positive Freedom

Freedom to pursue one's
conception of the good
and to exercise one's
capabilities (e.g., Marx)



Paternalism & Poverty



Sometimes the mechanism by which poverty is exacerbated is thought to run through people's **choices**.

In the Victorian era, it was thought that the poor stayed poor because they chose to spend their wages on drinking instead of saving.

Blaming the Poor's Choices



A similar justification has been offered for 'targeted' poverty relief programs.

Worries About Paternalism



Many times this kind of paternalism assumes that: the poor are incapable of making good choices, that the poor lack the information they need to make good choices for themselves, that the poor do not know what is good for them.

The justification for paternalism targeted at the poor thus often assumes and portrays the poor as less capable and equal citizens.

Esther Duflo, Tanner Lectures, 2012

Real agency is constrained, not only by institutions and laws but by both the **practical ability to make choices** and **the power of inertia**. The existence of **defaults** and the **status quos** for most choices means that people can't help but be steered in some direction. ... the specific nature of the defaults... that govern the rich steer individuals more in the direction of healthier lives, more security in old age, and less vulnerability than the defaults of the poor.

The Argument For “Paternalism”

The poor are **forced to make choices** about basic life-or-death decision (i.e. water chlorination) whereas others have those decisions made for them.

Choices are expensive. They require that we spend time, and mental and emotional energy. When the poor are forced to make choices about basic matters, they are expending energy and time they could have spent focusing on other choices.

Therefore, in virtue of having to make so many choices about basic matters, the poor are **less free** to make choices that promote their own good and exercise capabilities they value.

Making those choices is a way of **expanding freedom**, not limiting it.



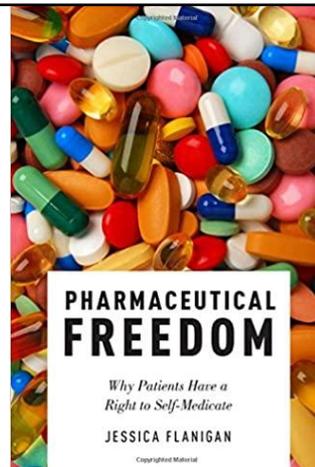
Pharmaceutical Freedom

Jessica Flanigan on the Right to Self-Medicate

Pharmaceutical Freedom

Defends patients’ right of *self-medication*.

Rejects “medical paternalism at the pharmacy”.

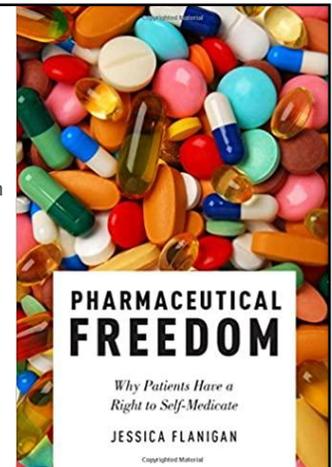


Pharmaceutical Freedom

Status Quo:

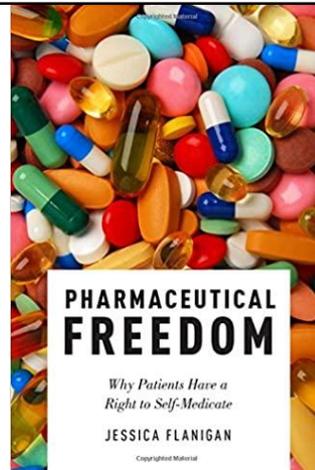
Many drugs require a **prescription** from a doctor in order to legally purchase.

Drugs must undergo a lengthy and onerous **premarket approval process** (testing efficacy and safety) before they can be sold.



Pharmaceutical Freedom

Flanigan argues that existing pharmaceutical regulations have harmful effects (which go largely unnoticed) and that they violate our right to self-medicate.



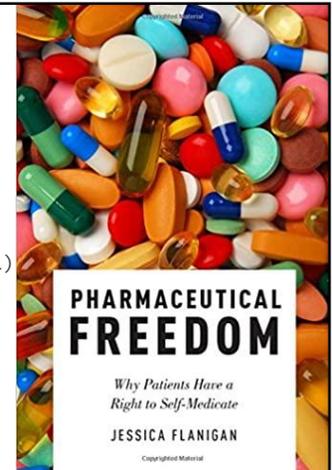
Pharmaceutical Freedom

Example:

Imagine that Adam decides that it is in his overall interests to use a prescription stimulant (e.g., Adderall) as a cognitive enhancement.

Adam doesn't have ADHD (etc.) and is denied the prescription by his doctor.

Should Adam be able to take the drug if he wants?

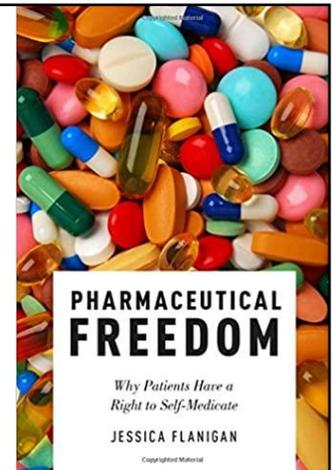


Informed Consent

We have a right to make medical decisions protected by the doctrine of **Informed Consent**:

Requires that physicians...

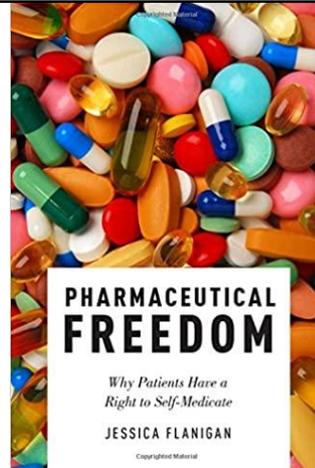
- (1) respect all competent patients' decisions to *refuse treatment*, and
- (2) *inform them* of all relevant treatment alternatives.



Informed Consent

Flanigan's argument:

If you think we have the right to *informed consent*, then you should also support the right to self-medicate.

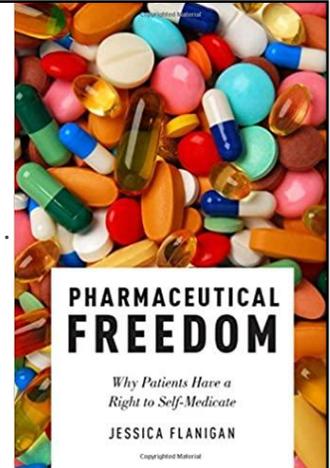


Informed Consent

Example 1 (Risky Refusal):

Debbie has diabetes and her doctor advises her to start insulin treatment. she would rather treat her condition with diet and exercise.

Would it be wrong for her physician to inject Debbie with insulin against her wishes?

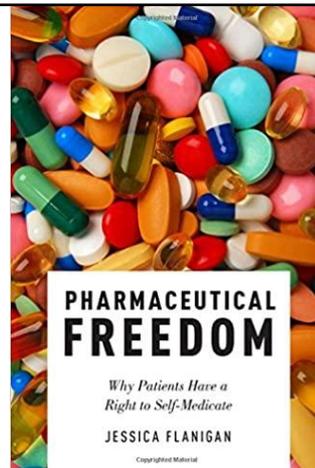


Informed Consent

Example 2 (Risky Access):

Danny has diabetes and his doctor advises him to diet and exercise. Danny would prefer to take insulin instead.

Would it be wrong for his physician to refuse to write Danny a prescription for insulin?

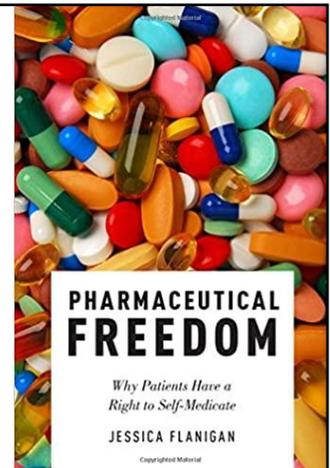


Informed Consent

Flanigan's Point:

There is no morally relevant difference between these cases.

If we have the right to refuse care (which we do), then we also have the right to self-medicate.

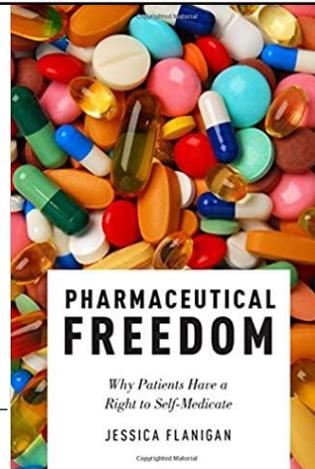


Informed Consent

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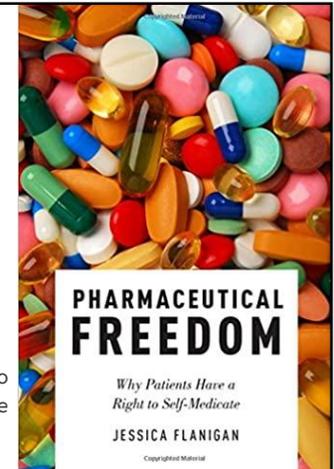
- P1 If we have a right to **refuse medical care**, then we have the right to **self-medicate**.
- P2 We have a right to **refuse medical care**.
-
- C We have the right to **self-medicate**.



Informed Consent: closer Look

What Justifies Informed Consent?

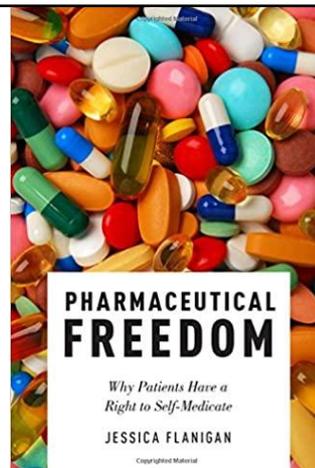
- (1) The practice of respecting medical autonomy likely produces good health outcomes on balance.
- (2) Patients are in a better position to know what serves their overall interests than physicians are.
- (3) We have bodily rights and rights to make intimate decisions (even if we would make imprudent choices).



Informed Consent: closer Look

What Justifies Informed Consent?

- (1) Better health outcomes, on balance.
- (2) Better overall welfare outcomes.
- (3) Anti-Paternalism.



The Analogy

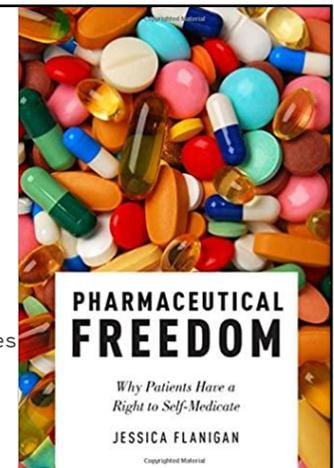
These three moral considerations equally well support the right to self-medicate.

- (1) **Better health outcome, on balance.**

Current system deters innovation and delays potentially beneficial therapies

Raises prices of treatments

Causes people to take more risks



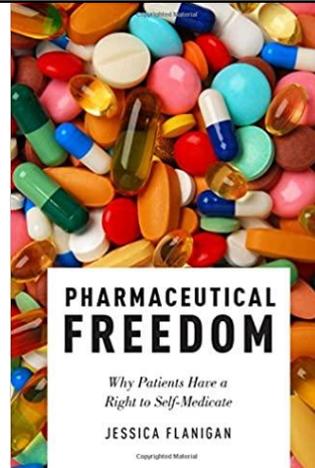
The ANalogy

These three moral considerations equally well support the right to self-medicate.

(2) Better overall welfare outcomes.

Competent and informed adults are better judges of their well-being overall.

So, we should defer to them.

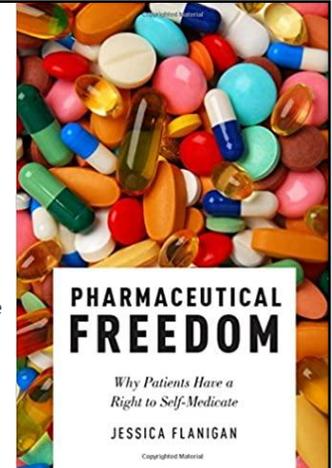


The Analogy

These three moral considerations equally well support the right to self-medicate.

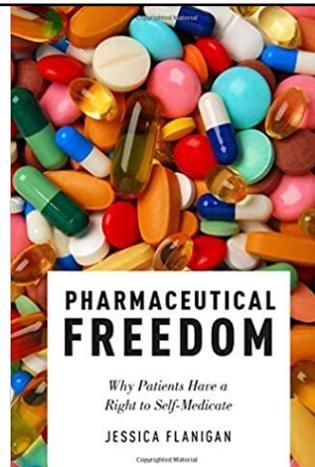
(3) Anti-Paternalism.

It is disrespectful to prevent someone from making a self-regarding choice (especially when that choice is an intimate and personal one).



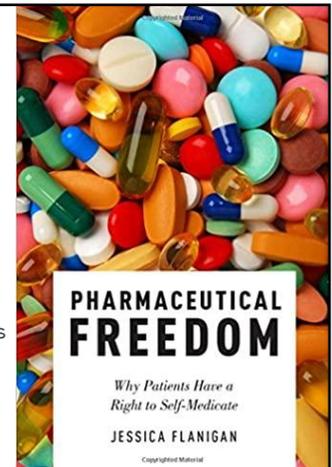
Conclusion

Patients should have legal access to pharmaceuticals.



Objections and Worries

- What about addictive drugs?
- What about vaccines?
- Won't this have very negative public health consequences?
- What incentives would this create?
- How would this affect the relationship between drug companies and consumers?



Questions?

