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When is it ethical for the decision of the majority to prevail over that of the individual?

Theodore Squires

Year 12

Introduction

An assumption in a modern democracy, or whenever a number of people congregate to vote, is that the decision of the majority overrules that of the individual. This assumption is inherently utilitarian and defenders of democracy will often state that it is the best model for protecting the interests of the largest number of people, or attaining the greatest good for the greatest number. This essay will examine when it is ethical for the individual to be overruled by the majority, particularly in relation to governance. This fundamental question has profound implications on law-making, law-enforcing and ethics. In these regards it is a continuation of the political philosophy traditions of Hobbes, Locke, Rawls and Nozick. Firstly, ethical criteria must be established, arrived at through an analysis of consequentialism and deontology. The ethics of group actions in a state of nature will be assessed to provide a base-level for comparison before the ethics of majority rule in a governed state are examined. Finally, the ethical implications of the analysis will be discussed in relation to modern states.

Ethical Criteria

As the research question asks when it is ethical for an event to occur, we must examine ethical theory. Of all ethical theories, deontology (Kant) and utilitarianism are the most relevant to the topic, as the existence of a state is commonly justified in terms of utilitarianism and consequentialist ethics, while deontology is an important opposing theory.

Democracy – rule by the people – is a non-elite system of government: unlike other systems the influence of an individual on governance is not limited or weighted by some characteristic, other than, perhaps, being of a minimum age. The vote of any given individual has the same value as any other individual. In utilitarianism, everyone's utility has the same moral weight. Hence, if legislation is put to vote that will affect a large number, then, assuming all will vote rationally, the majority decision will be the one which maximises utility. Here we see two inherent utilitarian justifications for democracy: both the votes and utility of all are considered equal; the democratic process tends to maximise utility. However, this can lead to some being advantaged at the cost of others in the pursuit of greatest good for the greatest number, for example through income redistribution.

How far should the pursuit of utility be taken? At the most extreme end, utilitarianism disregards justice and the morality of the action itself in attaining an increase in net utility. H.J. McCloskey uses the hypothetical example of framing an innocent man to avoid rioting and further damage to suggest this.¹ Unrestricted utilitarianism is consequentialist. However, consequences are often unknowable or not fully accountable when determining the expedient course of action. As the social sciences show, determining causal relations between act and

¹ McCloskey, H.J., 1957. *An Examination of Restricted Utilitarianism*, The Philosophical Review, Vol. 66, No. 4, pp. 466-485

consequence are very difficult with human action. Therefore, should it be the *intended* consequences and resultant effect that we consider when determining morality, or the actual consequences, which will only be known post-fact, if at all? As well-intentioned actions have often had bad consequences, unrestricted utilitarianism, also known as act utilitarianism, leaves the potential for not only unjust actions to achieve a net increase in utility, but also unjust actions which fail to achieve a net increase in utility, despite being well-intentioned.

The two main apparent weaknesses of act utilitarianism, being its disregard for justice and the difficulty in determining consequences, could be mitigated through the introduction of rules or restrictions. Rule utilitarianism proposes that actions are ethical if they conform to rules that increase net utility.² A rule might be “always tell the truth”, which will generally result in the greatest good. Rule utilitarianism differs from act utilitarianism in that act utilitarianism will always seek the action that maximises net utility, even if it breaches a rule, while rule utilitarianism holds that always adhering to the rules will result in more utility overall. The problem of justice in act utilitarianism could, it would appear, be mitigated with rules like “never kill an innocent person”. However, there will be exceptions for which breaking the rule maximises utility. There might then be sub-rules for these exceptional circumstances. Thus the rule would be “never kill an innocent person, except in *xyz* circumstances, in which case adhere to *abc* sub-rules”. There could then be sub-rules for the sub-rules. If there were a sub-rule for every exceptional circumstance, which are infinite, then rule utilitarianism is effectively act utilitarianism as an individual could always find the sub-rule which best achieves utility, regardless of whether it adheres to the general rules. In such a fashion rule utilitarianism collapses to act utilitarianism and thus retains the two main criticisms.³ If, however, there are no sub-rules for rule utilitarianism, then in any given case the consequentially optimal action may be disallowed. As there are infinite cases, rule utilitarianism without sub-rules cannot maximise utility unless adherence to the rules itself, regardless of consequence, increases net utility. Are there any such rules for which adherence is more important than consequences, however great or severe? If yes, then the ethical theory is no longer consequentialist.

With act and rule utilitarianism, the problem of whether an action is deontologically ethical remains. According to Kant, deontological ethics are more satisfactory than consequentialist ethics as the consequences of an action are rarely entirely within one’s control – that is, there are often unseen and unpredicted consequences of actions, which can be desirable or undesirable, but if the action itself is immoral then it should not be pursued. The problems of justice in utilitarianism arise when the end result – the net increase in utility – is given more importance than the morality of the action itself. There must be some way of determining whether the action itself is moral within the deontological perspective.

One of Kant’s principles, that one should treat humans as ends in themselves, not means, cannot be considered compatible with utilitarianism.⁴ An example of treating humans as means would be framing an innocent man, or keeping slaves. What makes these actions deontologically unethical? One could explain it in terms of rights and rights violation. One could propose the following criterion: An action is ethical if it does not unreasonably impinge upon the rights of another individual. This criterion has the weight of intuition on its side – for example, the aversion to murder is arguably inherent to humans as it violates another’s

² Garner, R & Rosen, B, 1967. *Moral Philosophy: A Systematic Introduction to Normative Ethics and Meta-ethics*. New York, p. 70.

³ Lyons, D, 1965. *Forms and Limits of Utilitarianism*, Oxford University Press

⁴ Kant, I, 1785. *Groundwork of the Metaphysics of Morals*

right to live. Likewise, theft is a crime as it violates property rights. The intuitiveness of this deontological criterion suggests that rights are inherent to humans, not a construct. This lends itself to natural law, as discussed in Chapter Two.

Imagine a situation in which one innocent person can be sacrificed to save the lives of ten others. Consequentially, it is moral to do so. Deontologically, however, it is not as it would be a violation of that individual's right to live. Is not the death of all worse than the death of one? Deontologically it is ethically worse to sacrifice one than for all to die for "it is preferable to suffer injustice than commit injustice".⁵ One individual could *choose* to sacrifice themselves, however, and that would be deontologically ethical. This is the second part of the rights-based understanding of ethics: if all parties voluntarily agree to something, and it does not unreasonably impinge upon the rights of others, it is ethical. There are, however, actions for which it would be impossible to receive the permission of all involved parties whose rights may be violated. For example, a construction firm building a skyscraper cannot be expected to gain the assent of the entire city, yet there is the risk that the crane might fall over and kill people, which would violate their rights. Here, consequentialism has an intuitive advantage: the benefit of a new building might outweigh the small risk of injury to the general public. Is this reconcilable with the precept of rights?

Nozick proposes a system of compensation to address rights violation.⁶ If the crane did fall upon the city it might violate property rights and the right to life. Since it is unreasonable to ban anything which could potentially harm third parties, Nozick suggests that the construction firm would be liable to pay compensation to any third party victims. Indeed, compensation is a goal of justice and could be arbitrated in or out of court as currently occurs.

For this investigation, voluntarist rights-based deontological ethics will be used.

The State of Nature

A traditional basis for analysis in Western political philosophy is the postulated 'state of nature'. While Hobbes presents a very unattractive state of nature, Locke, Rawls and Nozick present far less chaotic hypothetical states, indicating that depending on the initial premises of how humans behave, different and rival hypotheses on the natural order can be created. The state of nature is therefore a useful thought experiment as it attempts to show how humans would act, given certain assumptions and within certain restrictions. I will propose a state of nature based on Locke and Nozick to examine whether an individual can be ethically overruled by the majority. Locke's state of nature was shaped by his concept of natural rights, with clear relevance to the ethical criteria proposed. Nozick further developed a state of nature based on voluntary association, suggesting how and why a state might emerge. The state of nature will also serve as a point of comparison in Chapter Three as natural rights are applicable to both ungoverned and governed states.

First, one must establish whether rights-based ethics can be applied to a state of nature: that is, are there rights in a state of nature? Here arises the concept of natural rights. We have already established that natural rights are *a priori*. Locke suggests that the three natural rights are: firstly, the right to life; secondly, the right to liberty; thirdly, the right to estate (property). The second right is absolute insofar as it does not conflict with the first; the third is absolute

⁵ Aristotle, 2012. *The Art of Rhetoric (Collins Classics)*. Edition: HarperPress, p.40

⁶ Nozick, R, 1974. *Anarchy, State and Utopia*, p.57

insofar as it does not conflict with the first or second. Natural rights are considered fundamental – they can neither be granted nor revoked.⁷ Given this, they apply in a state of nature. Locke’s theory of rights is useful for this investigation for its simplicity and broad applicability – further, Locke’s recognition of property rights as natural is important in the context of a state of nature.

If property rights are natural rights, then they must also be negative rights. A negative right restricts the actions of one individual against another rather than prescribing certain actions – ie. if one has the negative right to owning a house, then others are prohibited from stopping one from owning that house, but they are not obliged to help one gain ownership of it. That natural property rights are negative can be established through *reductio ad absurdum*. An individual, entirely removed from other people, has the property right to house ownership. If house ownership were a positive right, others would be obliged to help them in gaining ownership; as there are no others who could do so, property rights must be negative. It would be counter-intuitive and illogical to ethically require the impossible, thus property rights cannot be positive. Further, positive property rights may impinge upon others right to liberty. That property rights are negative indicates, within a state of nature, individuals are bound to respect and not violate the property rights of others. This forms the basis of natural law and is applicable to the other natural rights. Under natural law, an individual would be permitted to defend oneself from aggressions against one’s rights. Thus, natural law governs human interaction in a state of nature.

Within a state of nature, individuals and communities will tend towards cooperation rather than violence and crime, as an individual is lawfully and ethically permitted to defend oneself from others, making crime a violent and risky affair. There are also a variety of benefits of living together: living together makes the sale of goods and services easier; the division of labour; more efficient public structures etc. Further, as no one is forced to live in the village, it can be seen that the benefits arise from voluntary association.

Does this rely too much upon an assumption of human rationality? If people are not inherently rational, or are only rational some of the time, would they tend towards cooperation over criminal activity? While this investigation lacks the scope to thoroughly justify human rationality, humans need not be entirely rational beings for the tendency to hold true. An animal of some intelligence can be trained through pain and reward to certain behaviours. Thus, only a basic awareness of pain and pleasure is necessary for actors to tend toward those actions and behaviours that will maximise their pleasure. Given that violating the rights of others is punishable, the right to self-defence would be an effective deterrent, limiting – though not eradicating – people’s tendencies to act on violent, destructive or unlawful urges.

However, even with the right to self-defence, crime could still emerge within a state of nature. The strongest or slyest individuals may find that an individual’s self-defence is insufficient to stop their pursuits, which leaves natural rights assailable. To increase their security from crime, like-minded individuals might band together in mutual defence associations for collective security. Many such associations may be established, which would further discourage crime, as there would be more enforcers of the natural law and, through division of labour, more effective provision of security. It is ethical for groups such as these to form as they do not violate the rights of others.

⁷ See Thomas Paine *Rights of Man* (1791): “It is a perversion of terms to say that a charter gives rights”

Natural law is an example of the majority exerting its will on the individual. Certainly it is in the interests of society for the law to be upheld, as it facilitates security and prosperity. Natural law can be enforced in two ways: firstly, through self-defence; secondly, through social pressure.

Natural law cannot be enforced or upheld through the initiation of force. An individual or group cannot attack others to discourage pre-emptively their criminal tendencies as the initiation of force would itself be a violation of natural law, entitling the victim to respond in kind, such that the initiation of force to uphold the law leads to spiralling violence. As natural rights are negative, natural law prohibits aggression against an individual's rights. However, when someone else initiates violence against an individual, that individual has both a right to use force in self-defence and to exact justice (this justice being commensurate to the crime) and to call in 'agents' to act in his defence, provided again that they act proportionately. Thus, the criminal receives justice and other criminals are deterred.

The second way that natural law can be upheld is through social pressure. If an individual becomes known for violating the property rights of others, others can choose not to enter into contracts with them. They could be denied access to goods and services in such a manner, and a village could make them feel very unwelcome (though not expel them with force, unless they had initiated violence). Essentially, through individual action, society will shun disreputable people and criminals through choosing *not* to voluntarily associate and contract with them. Considering that natural rights are negative rights, the village does not violate the rights of the shunned by refusing to cooperate, trade and serve them.⁸ The result of social pressure is that a prospective criminal or contract-breaker may observe the consequences of crime and decide that the benefits of living law-abidingly are greater.

Both methods of upholding natural law are ethical. However, the second method – social pressure – has interesting implications: just as society can shun crime and criminals, so too can society shun other behaviours. In such a fashion things, themselves not crimes, can be discouraged. This may include smoking, homosexuality or playing soccer. Shunning soccer players in a state of nature does not violate their rights as they can choose to live elsewhere where their soccer playing is not discouraged. Further, no one in society is obliged to shun an action; to shun or not to shun is a matter of voluntary association. Cultural norms and taboos are examples of social pressure, and are, for the most part, ethical.

Thus, one can see that within a state of nature a majority can ethically exert its will on an individual. The following chapter will examine whether the same holds true in a governed state.

Politics

Having established in the preceding chapter the state of nature as the base-point of ethical comparison for this investigation, it is now necessary to examine ethics within the real world. Ours is an era of democratic states, so democracy will be the focus.

If the state of nature is the condition in which only limited restrictions are imposed upon human action in accordance with natural rights and natural law, the governed state is the

⁸ Note that if a group within the village *forced* other villagers to stop trading with the shunned, this would be unethical as it violates the right to voluntary association.

condition in which the restrictions imposed upon human action extend beyond natural law. By what power are these additional restrictions imposed and enforced? There are two possibilities: social pressure and the initiation or threat of force.⁹ If the additional restrictions are implemented only through social pressure, as outlined in the previous chapter, then it is effectively a state of nature, albeit an arguably more ‘advanced’ or ‘ordered’ one. Such restrictions can be considered public decisions resulting from consensus on what is acceptable behaviour and will tend to arise in ungoverned and governed states, with the same ethical consequences.

The state has additional powers to that of a voluntary association or business as it alone has the ‘right’ to initiate violence. As previously discussed, an individual’s right to life, liberty and property necessarily mean that none are permitted to attack them, and, if they were to, the individual would be permitted self-defence. However, an individual is not permitted self-defence against the state’s use of force. For example, if one refuses to pay taxes, and then refuses to be arrested for tax evasion, the police are permitted to use violence to force one’s arrest. One would then face incarceration, again without any right to self-defence. Ultimately, the same process of enforcement applies to all the state’s laws, although the consequences of non-cooperation vary in severity. The state’s abrogation of self-defence empowers it and differentiates it from a group of criminals. The ‘right’ or capacity to initiate force applies to democracies, dictatorships and monarchies alike. The difference is, in a democracy, the state’s ‘right’ to initiate force comes from its legitimacy, a mandate from the people who elect the government. The monopoly to lawful initiation of force is necessary for the state’s monopoly on the judicial system. Combined with legislative power, the state is the final arbiter on what the law and legislation is and has the means to ensure it is upheld.

Through the democratic process, the laws of the state are the expression of the will of the majority. Thus, in a governed state, the majority is given a third means of exerting its will on the individual: through legislation and the initiation of force. This is a significant departure from the two means available in a state of nature (self-defence and social pressure). In the context of a governed state, it is important to differentiate between natural law and the laws of the state. The former is timeless and limits an individual only insofar as he cannot violate the rights of others. Natural law has formed the basis of many systems of law throughout history due to its intuitiveness and rationality.¹⁰ The state’s laws, also called legislation, are usually based on the principles of natural law, but extend beyond natural law. Legislation changes over time, new legislation is created and old legislation updated. Various acts and regulations are proposed, voted upon and then adopted or rejected. As such, the laws of one state will differ from the laws of another.

An example of legislation through which the majority has exerted its will on the individual is laws against homosexuality and gay marriage, which exist in many countries. The basis of such legislation is not natural law, for homosexuality does not violate the rights of others, but public opinion, often grounded in religion or idiosyncratic prejudices. In a state of nature, society could shun homosexuals and use social pressure as previously outlined, but there could be no recourse to the law, for it has been shown that natural law protects liberty. In many governed states however, with the state’s monopoly on law-making, a homosexual who wishes to marry is barred from doing so. In some democracies, such as Pakistan,

⁹ Reactionary or self-defence violence cannot be used to uphold non-natural law as to do so would be a violation of rights as outlined previously and would not be an act of self-defence.

¹⁰ In the Ten Commandments, commandments 6, 8 and 9 arguably come from natural law. Many Christian philosophers thought natural law fundamental to Christianity (see Thomas Aquinas’s *Summa Theologica*)

homosexuals can face life in prison as a result of their sexual orientation because the majority has willed it so.¹¹ This is not an expression of social pressure as formulated in Chapter Two, but rather the majority's use of force, through the state, to exert its will. In Pakistan there are religious justifications for the repression of certain behaviours, although this does not alter the fact that the law is the expression of the majority. Even if one accepts the religious (or other) premises for a law, these premises cannot be unequivocally considered universal or unquestionable. By the ethical criteria established in Chapter One, laws against homosexuality are unethical: they necessarily involve the state violating the rights of an individual.

Can this argument be extended to other legislation? If yes, would this undermine the legitimacy of the state to such a degree that its existence is simply violent oppression of the people? In states where it is illegal, homosexuality can be considered a 'victimless crime' as it does not violate the rights of others. Drug use could also be considered a victimless crime as simply using a drug does not necessarily violate the rights of others (use of drugs in conjunction with driving or certain other activities being different). Such legislation, and the use of force to enforce it, is therefore unethical from a deontological perspective. Insofar as anti-drug, anti-prostitution, anti-homosexuality, anti-gambling etc. laws are the expression of the majority, they are a deontologically unethical expression. A common utilitarian justification is that the consequences of not prohibiting these activities would be worse. However, this is questionable, largely for the reasons outlined in Chapter One. In the case of drugs and prostitution, criminalisation often creates more crime and rights violations than it has prevents, for example during the 1920s Prohibition and the War on Drugs since the 1970s.¹² It is partly because of the unintended consequences of using violence to prohibit victimless crime that deontological ethics are preferable.

One can therefore see that legislation needs to have a more limited scope to remain ethical: simply being the will of the majority is insufficient ethical justification. Where legislation enforces the natural law and encourages people's adherence, promotes voluntary charitable acts and does not unreasonably impinge upon the rights of man, it is ethical. Most of the time, such legislation has popular approval regardless of society, culture and context.

Conclusion

Through applying the ethical criteria proposed in Chapter One, and building upon the ideas developed in Chapter Two, the research question has been satisfactorily answered if one accepts the premises of the argument. It is only ethical for the majority to exert its will on the individual when doing so upholds the natural law in accordance with the natural law, or when the imposition does not itself violate the natural law. This has important implications on modern democracy, as it shows criminalisation of victimless behaviour is unethical, as is other legislation restricting the exercise of negative natural rights, such as the banning of organisations, restriction of freedom of speech and imposition of a state religion. As a result of these ethical restrictions, the legislation of a democracy, and the state itself, can only claim moral legitimacy if it does not initiate force to uphold laws that unreasonably impose upon a citizen's natural rights. The rejection of consequentialist utilitarianism on the grounds outlined in Chapter One need not be a rejection of democracy itself, but merely an argument in favour of a more limited role for government.

¹¹ Pakistani Penal Code, <http://www.pakistani.org/pakistan/legislation/1860/actXLVof1860.html> , accessed 2/6/13

¹²Cost of the War on Drugs, <http://www.countthecosts.org/seven-costs/creating-crime-enriching-criminals>, accessed 29/5/13

Bibliography

Print

Aquinas, T, 1265. *Summa Theologica*

Aristotle, 2012 (1st edition: 4th Century B.C.). *The Art of Rhetoric (Collins Classics)*. Edition: HarperPress

Garner, R & Rosen, B. 1967. *Moral Philosophy: A Systematic Introduction to Normative Ethics and Meta-ethics*. 1st ed. New York, Macmillan.

Hobbes, T, 1993 (1st edition: 1651). *Hobbes: Leviathan, Cambridge Edition*: Cambridge University Press.

Hoppe, HH, 2001. *Democracy: the God that Failed*. 1st ed. New Brunswick: Transaction Publishers.

Kant, I., 1998 (1st edition: 1785). *Kant: Groundwork of the Metaphysics of Morals*, Cambridge, Edition: Cambridge University Press

Locke, J, 1988 (1st edition: 1689). *Locke: Two Treatises of Government Student edition*, Cambridge, Edition: Cambridge University Press.

Lyons, D, 1965. *Forms and Limits of Utilitarianism*. 1st ed. Oxford, Oxford University Press.

McCloskey, HJ, 1957. An Examination of Restricted Utilitarianism. *The Philosophical Review*, vol. 66,no. 4, pp. 467-485

John Stuart Mill, 1975 (1st edition: 1859). *On Liberty (Classics)*. London, Edition: Penguin Books.

Narveson, J, 1987. *The Libertarian Idea*. 1st ed. Waterloo, University of Waterloo

Nozick, R, 1974. *Anarchy State and Utopia*. Edition: Wiley-Blackwell.

Oppenheimer, F, 1999. *The State: Its History and Development Viewed Sociologically*. New Brunswick: Transaction Publishers

Paine, T, 1995 (1st edition: 1791). *Rights of Man, Common Sense, and Other Writings (The World's Classics)*. Oxford, Edition. Oxford University Press .

Popper, K, 1962. *The Open Society and its Enemies*. London, Edition: Routledge.

Rawls, J, 1971. *A Theory of Justice*. 1st ed. Harvard: Harvard University Press.

Rothbard, M, 2009. *Anatomy of the State*. Auburn: Ludwig von Mises Institute.

Rousseau, JJ, 2006 (1st edition: 1762). *The Social Contract (Penguin Great Ideas)*. London, Edition: Penguin Books.

Weber, M, 1947. *Theory of Social and Economic Organizations*, translated by Talcott Parsons. New York: Free Press

Online

Count The Costs. 2012. *Creating crime, enriching criminals*. [ONLINE] Available at: <http://www.countthecosts.org/seven-costs/creating-crime-enriching-criminals>. [Accessed 29 May 13].

Pakistan Penal Code, 1860. [ONLINE] Available at: www.pakistani.org/pakistan/legislation/1860/actXLVof1860.html [Accessed 2 June 13]



Shaun Gerschwitz

Year 12

Can sanity be clearly differentiated from insanity ?

“It’s a lot harder to convince people you’re sane than it is to convince them you’re crazy”

(Ronson, Jon Ronson: *Strange answers to the psychopath test* 2012).

“Maybe no one’s really crazy, everyone is just a little bit mad” (Walters 2011).

These expressions of doubt regarding humanity’s sanity raises the question; ‘Can sanity be clearly differentiated from insanity?’ The blurred boundary that lies between the two impacts on whether the individual, the clinician, and society, can accurately tell the difference. Insanity is a label that has the power to condemn, remove the validity of a person’s views, and completely change society’s perceptions of and interactions with that individual. A circular paradoxical situation arises upon the labelling of an individual as insane, whereby their actions will then be perceived in that context. Once seemingly normal behaviour will become in the eyes of the beholder, the actions of a madman. “Modern man no longer communicates with the madman ... there is no common language” (Foucault 1967). The clinician and society must instead make ‘sentencing’ judgments regarding the individual’s sanity. However, the understanding and diagnosis of insanity continues to be problematic. Insanity has plagued humanity since the beginning of independent thought, yet still remains a mystery.

Modern psychology and psychiatry, reflecting society’s perceptions, apply the physical to the non-physical, in relation to insanity’s study and diagnosis. However, it is impossible to enter into the mind of another. In disciplines such as physiology, physical bodies can be directly contrasted, using sight, touch, smell, taste and sound. This cannot be undertaken with the human mind. Furthermore, our understanding of insanity has changed over time. These issues contribute to considerable ambiguity in our understanding of insanity.

Issues arise when a clear differentiation between sanity and insanity is sought. It is known that “it is relatively easy to give examples of psychological abnormality, but much more difficult to provide precise definitions” (Gross 2003). Three primary issues can be drawn from attempts to differentiate between the insane and sane; the inherent ambiguity that arises as a result of insanity’s definition, the questionable ability of the individual to acknowledge and assess their own sanity, as a reflection of society’s failings, and the questionable accuracy of a clinician’s diagnosis.

Ultimately, the identification of insanity is intrinsically problematic. For the above reasons it can be asserted that insanity should be clearly defined, and distanced from the abstraction of present times. The arguments presented attempt to examine the extent to which the concept of insanity lacks a clear definition, within Western society.

Ambiguity Issue

Insanity cannot be concretely exemplified. It is a label assigned to a large number of symptoms, both exclusive and non-exclusive to those suffering madness. These symptoms

have the associated concept of insanity. Insanity is a “mass noun” (Oxford University Press, *Insane* 2013), meaning “a noun denoting something which cannot be counted (a quality)” (Oxford University Press, *mass noun* 2013). Many psychological professionals support this, including Ryan Howes, who states “Insanity is a concept” (Howes 2009). We attempt to describe this concept as if it were indeed a concrete truth, believing that if a certain number of symptoms from the ‘insanity checklist’ are evident within an individual, they are highly likely, if not certainly, insane. If the subject does not portray these tendencies in a ‘mad’ way, a diagnostician might suspect that some form of psychopathy is imminent. A concept is used to explain “the fact we can talk about what is not a fact” (Malmgren, et al. 2010). Hence as insanity is a concept, it cannot be a fact. Therefore attempting to reify the concept of mental illness can be problematic.

The collective and blurred definition of a concept can cause definitional problems. Diagnostic issues arise in all professions dealing with insanity, due to definitional ambiguity. Within psychoanalysis, there are contrasting ideas regarding insanity. A patient may be diagnosed differently when their symptoms are presented to different psychoanalysts; each clinician views the same symptoms differently, according to personal and clinical belief systems (Spiegel 2006). This raises the issue of certainty; one can never be entirely sure of diagnosis, as often someone else has conflicting views on the patient’s illness (Malmgren, et al. 2010). This situation is paradoxical, as a contrasting situation may occur. In some cases widespread agreement regarding the actual classification of an illness may be reached, regardless of differing concepts. Two separate psychiatrists whose personal understanding of the concept of insanity are aetiology-laden and dissimilar, may still classify the same patient as insane. This occurs because while both psychiatrists believe that the insanity occurred due to different causes, the resulting disorder and representation are identical. Both professionals believe that they are right, making further similar diagnoses regardless of dissimilar and false aetiologies.

These situations are constructive within the psychiatric discipline as they encourage more scrupulous diagnosis, however demonstrate some of the problems intrinsic to the sanity—insanity dichotomy. Both situations indicate that clinicians are unable to make accurate diagnosis, as both the attributed cause and diagnosed illness may differ greatly between similarly trained professionals. An individual’s life may depend on which clinician they see, rather than their true illness because “having once been labeled [insane], there is nothing the [patient] can do to overcome the tag. [It] profoundly colors others’ perceptions of him and his behavior” (Rosenhan 1973). Furthermore, if a clinician reaches diagnosis based on false aetiology, and this diagnosis matches that of another clinician, he may encourage the patient to undertake inappropriate treatment.

Until an all-encompassing, concrete definition for insanity emerges, these issues are difficult to avoid. Re-definition would require agreement on insanity’s true aetiology, re-classification of patients and renewal of professional’s beliefs. However, reviewing and changing systems, with the intention of combatting the problems demonstrated above, does little to fix underlying issues. The third Diagnostic and Statistical Manual of Mental Disorders (DSM-III) system in Sweden exemplifies this.

The definitions regarding the psychiatric categories of mental illness diagnosis were reviewed during the creation of DSM-III. It was required that all definitions be constructed to fit uniformly, five dissimilar purposes: “To enable uniform diagnoses in large-scale research, to provide an a-theoretical system that does not rely on aetiology, to meet the desiderata for

standardization by insurance companies, to be used for legal decisions, and to fulfil clinical and case research demands.” (Malmgren, et al. 2010)

DSM-III was created to eradicate reliance on several factors when seeking diagnosis, including superexperts (specialists in a particular disorder) and personal inferences stemming from theories. It seemed a logical way to resolve issues of cross disciplinary or individually conflicting diagnoses. Patients would be diagnosed with uniformly accepted conditions, simplifying the system. However, because the “operational criteria are just meant to serve as guidelines” (Malmgren, et al. 2010) it allows flexibility. Professionals may include personal experience, at their own discretion, into their diagnoses. This introduces significant human subjectiveness.

The personally influenced inferences, and ill-defined diagnostic terms, allow diagnoses which may not reflect the wider professional community, or global perspective. This re-establishes the original issues regarding insanity’s ambiguity that the system sought to dissipate. Furthermore, individuals have different agendas, which are influential in decisions with subjective definitions. For example, physicians and insurance company claims adjusters have completely different agendas, treating patients in accordance with this. The physician may be attempting to do what is best for the patient, whilst the insurance company claims adjuster may put the company first, due to economic concerns.

It can be concluded that there are inherent issues that occur due to the nature of insanity. Additionally, care must be taken when reviewing systems used in diagnosis to prevent the inclusion or worsening of previous issues. Undoubtedly, one of the fundamental issues regarding insanity is its ambiguous definition, stemming from its construction as a concept. It is highly possible that other issues, including those that arise as a result of both the individual and clinical inability to make accurate diagnosis, could originate from underlying definitional issues. Therefore the redefinition of insanity may be an essential step towards alleviating its problems.

How can we know?

The mind is neither physical nor non-physical and enables consciousness, thinking, reasoning, perception, and judgement. The mind and body are related and unrelated; it is not clear whether the mind can be understood in the same way as the body, or as an expression of the body. This is evident with illnesses such as Charles Bonnet Syndrome, a condition in which visually impaired/blind patients experience complex visual hallucinations (Sacks 2009), or Phantom Limb Syndrome, where amputees have the sensation that a missing limb is still attached to the body. This suggests that the mind creates our perception of the body, and even with removal of the physical, we still retain associated feelings as a result of our mind’s non-physical mental projection of the physical body. Whether the mind can be understood as directly analogous to the body is therefore doubtful. Is it justified to directly link the mind to the physical being and focus predominantly on physical identification and treatment for a non-physical condition? This raises questions regarding the accuracy at which the dominant mental health disciplines within society are able, both in their roots and application, to define and identify insanity.

One of “Psychology’s major roots” (Graham Richards, 2002 in (Gross 2003)) is the study of physicality, which has contributed to the problems of applying physicality to the non-physical. Emil Kraepelin introduced physical mapping of the mind in the first psychiatry textbook (1883). He proposed that mental disorders had predominantly physical diagnostic

indicators. Disorders were categorised as organic (biological nature), or functional (biological factors less evident), indicating that all mental illnesses have a physical base. This concept developed in the context of physical medicine, becoming fundamental in psychiatry. However, if this theory was unintentionally based on comorbid disorders, it leaves psychiatry with a flawed base. “Comorbid disorders (existing “simultaneously with and usually independently of another medical condition” (Merriam-Webster 2013)) ... often seem suspiciously similar, as though they share some common cause” (Claridge and Davis 2003 in (Gross 2003)). Comorbidity may be overlooked, as once an experimenter believes a certain link is evident; he is likely to draw conclusions to reinforce this. Further developments built on these theories.

Philosopher John Locke (1660) theorised that “atom-like, ‘corpuscular’ sensations ... built ... into ideas through ... ‘Laws of associationism’” (Gross 2003) were psychological phenomena’s origins; the mental being was made of discrete particles, all behaviour derived from these basic units. Parts of modern psychology and psychiatry are based on the theory, relating areas of the brain with specific behaviours. Ernst Weber (1800’s) applied the experimental approach of physiology to psychological issues, further strengthening its empiricism. Many issues may arise if these foundations are flawed.

Issues may correct themselves over time, however currently the disciplines, with respect to insanity, remain young. The practice of studying the insane was only developed in the last few hundred years, and psychology did not exist pre-eighteenth-century. Kurt Danziger (1997) states, “many of the fundamental categories of twentieth-century Psychology are...twentieth-century inventions” (Gross 2003). Modern Psychology has drastically altered the meanings of numerous concepts, including behaviour, to the extent that earlier equivalents are non-existent. If Psychology’s history is compared to that of another discipline such as physics, which dates back thousands of years, it is comparatively young. If the substantial number of paradigms and theories that have been proven false within the natural sciences during their early period are examined, it is questionable why certainty is given to psychological theories, when it is a relatively young science.

Modern psychology and psychiatry are therefore left with issues regarding current research and diagnostic methods. Primarily, psychology attempts to model itself on the natural sciences. Within the pure natural sciences, such as physics and chemistry, scientist can easily be objective. However, as psychology entails human beings studying other human beings, it is inevitable that unconscious biases will influence results. The researcher is to all intents and purposes studying themselves, such that they are interested parties. This makes objectivity, which is always difficult to achieve, doubly so. Furthermore, treatment and observation of patients is viewed as though they are part of the natural world. Whilst once justified, as the insane were considered animal, mirrored by their treatment, this view is no longer valid. People now function within an artificial human world. Applying concepts from the natural sciences is not easily justified.

Psychological studies may encounter the self-fulfilling prophecy and experimenter bias; the experiment’s outcome is influenced by the experimenter’s expectations. The “bias of the experimenter creates a changed environment in which subjects actually behave differently” (Gross 2003). Rosenthal and Jacobson’s ‘Pygmalion’ experiment demonstrated this (Rosenthal and Jacobson 1968). Teachers were told specific random students had ‘academic promise’ for the following year, whilst other students did not. The ‘academically promised’ achieved a greater increase in IQ than the other children. Achievement was caused by self-fulfilling prophecy; the gains occurred due to teacher expectations and behaviours. This

relates to the inadequacy of existing investigative and diagnostic methods for the purposes of understanding insanity and mental illness. Researchers cannot ensure that results from treatment or studies regarding the illness' aetiology are valid; therefore practitioner's diagnoses and treatments could be inherently flawed. A discipline undertaking a study to determine if insanity occurs as a result of particular influences may find positive results regardless. Therefore the whole system may be trending towards more easily defined illnesses, whilst the illness itself remains misunderstood.

Wilhelm Wundt, psychology's father, created 'experimental psychology' (1862). Stimuli would be systematically varied to cause different mental states; variables could be isolated and adjusted. Wundt recognized that the complexity of the human mind and the presence of a subconscious prevented accurate isolation. He argued that only 'lower processes' (sensations, attention and reaction) could be studied in this way. Other behaviours, specifically socially orientated and those incorporating 'higher processes' (thinking and sanity), cannot be studied under laboratory conditions. They must be studied in a community. Manifestations of insanity such as schizophrenia are often thought of as a result of an individual's interactions within society, so clinical studies of this type of mental disorder can only be studied in clinical contexts at the cost of setting aside possible crucial factors. Empirical data is often generated in these laboratory studies, but may be inherently flawed. Behaviour exhibited by someone outside a laboratory is often drastically different to their behaviour inside; therefore making experiments conducted in laboratories very poor indicators of true behaviour.

If the disciplines that study and diagnose insanity are as problematic as demonstrated, it is arguable that their ability to accurately define and diagnose insanity is limited and undermined. Diagnosis and conclusions made regarding an individual's sanity must be questioned due to the intrinsic lack of accuracy.

Circularity Issue

The extent to which the individual is able to acknowledge and self-assess their sanity is questionable. This requires humans to step outside of themselves, in order to assess what is sane and what is not. Much of society's interactions with the madman seem to indicate that the sane are able to find a reference point, outside of themselves, and through this assess the sanity of another. This is debatable and causes us to ask how they are justified in determining the sanity of another when they cannot accurately determine their own sanity. This circularity besets all views of sanity. The individual manifestation of this problem can be used to exemplify its collective significance within the larger body of humanity.

Mental health disciplines believe that an individual cannot, at least with accuracy, define and identify their own sanity. This is evident throughout psychiatric treatment methods. Patients are only considered to be improving, and allowed release, upon admitting and accepting insanity. Self-denial is considered a further element of madness. This indicates that not only do patients often not realize their insanity, but also refuse to accept it. This belief can be demonstrated using the Rosenhan Experiment (Rosenhan 1973); aimed at testing the reliability of psychiatric diagnosis. 'Pseudopatients' (healthy individuals) gave staged hallucinations in an attempt to be admitted into a psychiatric hospital. Each Pseudopatient was admitted and diagnosed with a psychiatric disorder. They then repeatedly informed staff they had not experienced any relapses and were feeling fine. Their mental stability was repudiated by staff. They were forced to acknowledge their 'mental illness' and commit to antipsychotic medication in order to be released. Rosenhan and others took this as evidence that clinicians lacked the ability to make accurate diagnosis. However, several issues such as

mundane realism and cultural bias were evident (Rice n.d.), combined with critics stating “[Rosenhan’s] thesis is seriously flawed” (Millon 1975), thus undermining the validity of his assertions. Regardless, the experiment still provides an accurate portrayal of clinician’s disbelief in patient self-awareness. It seems neither a patient’s claimed improvement, nor self-awareness of sanity, can be used as solid clinical proof of their sanity. Clinicians believe that diagnosis must come from external sources.

Many, including R.D. Laing (Collier 1977), oppose psychiatry, believing that its practice and beliefs are flawed and that individuals are aware of their own sanity. ‘Tony’, a Broadmoor Psychiatric Hospital inmate, is a recent example. Tony faked madness to avoid a prison sentence but “faked insanity too well” (Ronson 2012) and became stuck in the hospital. “The more he tries to convince...psychiatrists he's not crazy, the more they take it as evidence that he is” (Brian Daniels, Citizens’ Commission on Human Rights in (Ronson 2012) and (Ronson 2011)). Therefore, this demonstrates psychiatry’s flaws because Tony’s explicit self-awareness directly contrasts with his clinician’s diagnosis. This claim seems justified, however in Tony’s case, and those of other sane-claimers, the patients question “how do you walk like a sane person, talk like a sane person?” (Ronson 2011). Those opposing psychiatry feel this highlights the essential issue; it is easy to identify how an individual is different, but difficult to define what makes them normal. This actually does little to refute their insanity as it aligns with psychiatry’s original claim that individuals are unable to define their own sanity. While Tony was sure of his sanity, he was unsure as to what made him sane. He, and other insane patients are neither able to accept their insanity, nor able to define sanity. It is sometimes suggested that all humans are insane; a view presented publicly by Stephen King; “we’re all mentally ill” (King 2007), among others. Insanity could be part of everyone; however in most it lies dormant in the subconscious. For this purpose, we must define ‘conscious’ according to Freud’s re-definition of “consciousness as whatever is actually conscious at any given moment” (Badcock 1992), and accept that humans have layers of consciousness: consciousness and pre-consciousness. Christopher Badcock (Badcock 1992) uses a keyboard to demonstrate Freud’s perspective, describing how his fingers seem aware of a keyboard letter’s location, whilst his head is unsure. His fingers can instantly find the letter ‘v’, but it would take time to consciously picture its exact position. This can be refined as what might become conscious may not be subject to conscious awareness at any one moment. It can be hypothesized that an individual’s body and actions may portray insanity, whilst the individual remains unaware. It may take an event, such as depression or drug exposure, to emphasize symptoms to the extent that the individual is forced to acknowledge their insanity. Some individuals may still not accept their insanity. This reinforces the perspective that an individual cannot make accurate claims regarding their sanity. Furthermore, if we take common-insanity as truth, it becomes impossible to remove oneself from the human experience, and step outside of one’s mind in order to define the sane state. Freud and Schopenhauer argue that all humans have the potential to become insane. A source of Freud states; “if the resistance of the will against the apprehension of some knowledge reaches such a degree that operation is not performed in its entirety...certain elements or circumstances become for the intellect completely suppressed, because the will cannot endure the sight of them; and then, for the sake of the necessary connection, the gaps that thus arise are filled up at pleasure; thus madness appears” (Durant 1953). This causes the individual to imagine what does not exist and, to provide validity to these ‘false memories’, the mind convinces the individual of its sanity. Schopenhauer stated that “Madness comes ... to avoid the memory of suffering” (Durant 1953), allowing breaks in consciousness, so as to survive by forgetting the pain of certain experiences. This madness comes as a result of avoiding intense suffering. The individual pretends the event never happened to avoid the pain of its

memory, this in itself causing madness as they then believe the untrue. To accept their insanity would be to accept the suppressed horrors. Avoiding the truth of past actions and hiding memories within the subconscious is commonplace within humanity. Therefore, according to Freud and Schopenhauer, it is possible all humans are somewhat insane, but unable to accept it, as hiding memories is considered inherent within the human psychological dynamic. This is reinforced by eighteenth-century observations of Philippe Pinel; that through the harshest of treatment, the 'man' within a human could be abolished, leaving only an animal or beast and "madness is then cured" (Foucault 1967). As animals are seen to lack human mental capacity, it is arguable that they cannot suppress past experiences and cannot experience insanity.

These perspectives point strongly to the conclusion that individuals are unable to accurately acknowledge and draw conclusions regarding their own sanity. If this is true, how are individuals justified in determining the sanity of another? It seems that they are not. The collective inability of humanity to extricate itself from the sanity-insanity paradigm is demonstrative of the injustices of labelling an individual insane, as one inherently cannot be certain. There are ethical and moral dilemmas associated with this labelling. It is debatable whether the practice should continue. Furthermore, there is a likelihood that all humans are potential madmen, or that all of humanity is somewhat insane. This causes society to question whether insanity concretely exists, for if everyone is insane, can anyone truly be sane? The dividing line, if there even is one, is "a grey area in a world which doesn't like grey areas" (Ronson, 2012).

Conclusion

Insanity, allowing the polarization of those supposedly unlike us, no longer seems sufficient to alienate an individual from the society of 'sane' humans. We can neither be sure that insanity exists, nor that it is vastly different from what we call normality. At its purest form, insanity is only a concept and attempts to reify this are flawed. Its roots, attributed to psychology and psychiatry, may have been constructed on flawed theories stemming from beliefs that the mind is analogous to the physical being. The relative youth of the disciplines studying mental illness have prevented the retribution over time of these problems. However ultimately neither its source, portrayal by the affected individual, or labeling by the clinician and society, can be determined with great certainty.

The complexity of the human mind carries significant error to studies of the mind, making it difficult to isolate for accurate observations regarding the effect of specific stimuli. This, combined with the human inability to externalize and assess its own sanity, has contributed to a clinical situation where diagnosis is often conflicting and uncertain. The circularity issue exemplifies this uncertainty. An individual is unable to escape labels placed upon them regarding their sanity. The power that society and the clinician hold which can dramatically change a person's life through the diagnosis of insanity is questionable, given that humans are unable to accurately ascertain the extent of their own sanity.

Individuals may be labelled insane by culture, society, and action. It is likely that insanity is a part of the natural human psyche and it may either be evident either explicitly or to some extent, in all humans. Therefore, it is unjust that certain individuals are labelled madmen, when neither they nor their society are able to externalize themselves from their own sanity, nor make accurate conclusions regarding the extent or existence of insanity within another.

Overall, it seems that the ambiguity of sanity, and insanity's ill-defined boundary, demonstrate that insanity is vague, and cannot be defined. This is due to its nature, and applies to all identification attempts made by clinicians, individuals or society. The question arises as to whether the insane should be treated as they are, when ultimately no one is able to be sure if they are indeed insane. We can neither find a standpoint from which to gain clarity regarding these matters, nor be sure of our own sanity. Until humanity can step outside of these problems with insanity, our relationship to it will always involve ambiguity.

Bibliography

- Badcock, Christopher. *Essential Freud*. 2nd Edition. Oxford: Blackwell Publishers, 1992.
- Collier, Andrew. *R.D. Laing: The Philosophy and Politics of Psychotherapy*. England: The Harvester Press Limited, 1977.
- Durant, Will. *The Story of Philosophy*. 2nd Edition. New York: Simon & Schuster, Inc., 1953.
- Foucault, Michel. *Madness and Civilization*. Translated by Richard Howard. London: Tavistock Publications Limited, 1967.
- Gross, Richard. "Psychology as Science." In *Themes, Issues and Debates in Psychology*, by Richard Gross, 211-239. London: Hodder & Stoughton, 2003.
- Howes, Ryan. *The Definition of Insanity is...* 27 July 2009.
<http://www.psychologytoday.com/blog/in-therapy/200907/the-definition-insanity-is> (accessed April 4, 2013).
- King, Stephen. "Why We Crave Horror Movies." *Dr. Mark Womack*. 12 April 2007.
<http://drmarkwomack.com/pdfs/horrormovies.pdf> (accessed April 22, 2013).
- Malmgren, Helge, Susanna Radovic, Henrik Thorén, and Björn Haglund. "A philosophical view on concepts in psychiatry." *International Journal of Law and Psychiatry*, 2010: vol. 33, no. 2, pp. 66-72.
- Merriam-Webster. *comorbid*. 2013. <http://www.merriam-webster.com/dictionary/comorbid> (accessed April 17, 2013).
- Millon, Theodore. "Reflections on Rosenhan's "On Being Sane in Insane Places"." *Journal of Abnormal Psychology*, 1975: vol. 84, no. 5, pp. 456-461. .
Oxford University Press. *Insane*. 2013.
<http://oxforddictionaries.com/definition/english/insane> (accessed April 04, 2013).
— . *mass noun*. 2013.
<http://oxforddictionaries.com/definition/english/mass%2Bnoun?q=mass+noun> (accessed April 4, 2013).
- Rice, Keith E. *Key Study: On Being Sane in Insane Places*. n.d.
http://www.integrationsociopsychology.net/sane_insane-place.html (accessed April 22, 2013).
- Jon Ronson: *Strange answers to the psychopath test*. Directed by TED. Performed by Jon Ronson. 2012.
— . *The Psychopath Test : A Journey Through the Madness Industry*. New York: Riverhead Books, 2011.
- Rosenhan, David L. "On Being Sane in Insane Places." *Science*, 1973: 179. 250-58 .
- Rosenthal, Robert, and Lenore Jacobson. *Pygmalion in the Classroom: teacher expectation and pupils' intellectual development*. New York: Holt, Rinehart & Winston, 1968.
- Oliver Sacks: *What hallucination reveals about our minds*. Directed by TED. Performed by Oliver Sacks. 2009.
- Spiegel, Allen, Florence Kavalier. "The Differing Views on Insanity of Two Nineteenth Century Forensic Psychiatrists." *Journal of Community Health*, 2006: vol. 31, no. 5, pp. 430-451.

Joshua Walters: On being just crazy enough. Directed by TED. Performed by Joshua Walters. 2011.

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Collier, Andrew. *R.D. Laing: The Philosophy and Politics of Psychotherapy.* England: The Harvester Press Limited, 1977.

Foucault, Michel. *Madness and Civilization.* Translated by Richard Howard. London: Tavistock Publications Limited, 1967.

Badcock, Christopher. *Essential Freud.* 2nd Edition. Oxford: Blackwell Publishers, 1992.