

關於公共健康美德倫理學的  
跨文化對話：從儒家視角切入  
A Cross-cultural Dialogue  
on Public Health Virtue Ethics:  
A Confucian Perspective

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摘要

本評論文章批判地檢視凱瑟琳·麥凱的公共健康德性倫理學。我同意麥凱的論證：德性倫理學避免套用自由主義或平等主義等簡單原則於複雜的公共健康問題。但不同於麥凱，我的分析聚焦於儒家德性倫理學，而非古希臘德性倫理學。基於這種不同的關注點，我還指出了其公共健康德性倫理學的一個局限性：個人德性與政治德性之間關係和優先順序不明確，故無法解決政治

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決策與倫理原則之間的衝突。為解決這一問題，我提出儒家德性倫理學通過倡導個人德性的首要地位，提供了寶貴的洞見。

In her essay “Public Health Ethics: The State of Art”, Kathryn L. MacKay significantly contributed to clarifying public health ethics and discussing its challenges. Public health ethics, a sub-field of bioethics, focuses on moral questions related to population-level health issues and interventions. It aims at moral excellence in public health practice through institutional virtues such as justice, civic friendship, and epistemic humility. Thus, developing public health ethics is essentially developing institutional virtues in public health practice. Among several challenges, MacKay highlighted two: (1) the complexity of public health ethics leads to applying thin principles like libertarianism or egalitarianism to various issues; and (2) the political undertaking of public health issues may conflict with ethical principles. The first challenge considers which ethical principles should apply to specific public health issues, while the second points out the limitations of ethical principles against political decisions in practical wisdom.

Facing these challenges, MacKay proposed that virtue ethics potentially resolves the first challenge for two reasons.

First, the practical wisdom and careful deliberation of virtue ethics are well-suited to balance public interest and individual rights when making decisions about implementing new initiatives. MacKay insightfully observed:

**“Virtue ethics seems less suited to giving rule-like judgments on moral questions, and more favourable to giving context-sensitive judgments that may vary according to the details of a scenario. Virtue ethics is attentive to the particularities of different situations, and practical wisdom always has the final say about what is the right thing to do in a particular context” (37).”**

Unlike libertarianism or utilitarianism, virtue ethics emphasizes context-sensitive judgments through careful deliberation of various moral issues rather than rule-like judgments. No absolute moral rule applies to all situations, as what is right always depends on the specific context. Although MacKay provided no examples to further justify her observation, her proposal is valid across all virtue ethics. To support MacKay’s observation, I offer an example from Confucianism. Elsewhere, I argue that the conception of *yi* (義 righteousness, justice, or appropriateness), a cardinal virtue in Confucianism, considers libertarian or egalitarian perspectives depending on the appropriate context and circumstances (Tang 2023, 278). Mengzi insightfully

contrasted two virtuous decisions in good years and years of famine. In good years, people have enough to serve their parents and nurture their families. The government should safeguard people's liberty, allowing them to decide for themselves and take initiatives to improve health by contributing to lower poverty levels. However, in years of famine, to provide the means to escape death, an enlightened ruler must tax people's livelihood according to "the assistant method", which amounts to taxing based on proportionate contribution. Libertarianism lacks a sense of morality because it allows neglecting others in need or even putting them at risk. Conversely, egalitarianism lacks a sense of appropriateness because it applies a constant amount of taxation in both good years and years of famine. Consequently, Confucian virtue ethics illuminates MacKay's first reason: virtue ethicists resist simply applying thin principles like libertarianism or egalitarianism to various public health issues. Instead, they carefully deliberate how to balance public interest and individual rights appropriately in each circumstance.

Second, virtue ethics can ground the ontological framing of public health. The ontological framing of public health primarily derives from the ontological framing of health. MacKay stated:

"The ontological framing of 'health', whether the individual or the collective is considered primary, and whether health is considered to be an aggregative property or something beyond aggregation can influence how health problems are defined and what counts as a solution" (31).

The ontological framing of health can be distinguished into two interpretations: individual and collective. The individual interpretation views 'health' as primarily referring to individual health, with public health signifying an aggregative result of individual health. The collective interpretation sees health as primarily referring to collective health, with public health signifying something beyond the aggregative result of individual health, which makes the aggregation possible. The individual interpretation fails to explain the ontological framing of 'public' health, as it ignores what makes the aggregative result of individual health possible. In contrast, the collective interpretation recognizes this problem. MacKay responds by asserting that institutional virtues go beyond the aggregate result of individual health, making the aggregation possible (36). This underlying factor shapes the ontological framing of 'public' and 'health'. It follows that institutional virtues ground the collective interpretation of health's ontological framing. As institutional virtues fall within virtue ethics, virtue ethics can ground the ontological framing of public health.

I agree that virtue ethics can address the first challenge for these two reasons. However, MacKay's Aristotle-based public health virtue ethics has a limitation, leaving the second challenge unresolved.

Aristotle's doctrine of practical wisdom divides into ethics and politics, distinguishing between personal virtues (or virtues of character) and political virtues (or virtues of constitutions and political arrangements). The relationship and priority between these two forms of virtues have long been debated and remain unclear. While ethical principles don't always conflict with political decisions, potential conflicts are common in reality, as "governmental decisions made about the public health can be influenced by political agendas, economic interests, and industry stakeholder pressures" (28). For example, at the start of the pandemic, most governments refused to share vaccines with neighbors due to insufficient supplies. Such decisions, primarily influenced by political agendas, economic interests, and national security, failed to aid neighbors in danger. This violates the principle of beneficence, which obliges doing good for others and removing conditions that may harm them. From an Aristotelian virtue ethics perspective, both sharing and not sharing materials with neighbors could be justified if they achieve the community's public interest, depending on the form of government. This approach proves unhelpful in addressing issues like distributing anti-epidemic supplies during critical moments. Similarly, it's unclear how MacKay's public health virtue ethics would evaluate this conflict and take a stance. This unresolved puzzle threatens the explanatory power of MacKay's idea and the full theorization of public health virtue ethics.

I argue that Confucian virtue ethics, unlike Aristotelian virtue ethics which doesn't explain the primacy of ethics or politics under practical wisdom, can offer helpful advice to resolve this puzzle. In Confucianism, personal virtues have supreme priority. Kongzi asserts that justice is not merely an institutional virtue but primarily a personal one: "The superior person admires *yi* above all." *Yi*, meaning righteousness, justice, or appropriateness, primarily involves having a sense of what's appropriate in a given context. This sense of appropriateness isn't simply motivated by adherence to moral judgments or subjection to our constituted sense of appropriateness. While our sense of appropriateness is primarily and necessarily motivated by compassion, it's secondarily and contingently amended by conventions. This explains why Mengzi argues for the intertwining of cardinal virtues such as *ren* (仁 benevolence), *yi*, and *li* (禮 rites).

Kongzi also asserts that the function of *li* is to harmonize, and harmony is the [most] precious. Rites integrate various human interests into a potentially harmonious system where individuals learn and practice virtues that enable appropriate and cooperative interactions. However, justice and rites alone are insufficient, as people without benevolence may blindly follow conventional appropriateness and insincerely practice ritual rules. The great exercise of benevolence fundamentally involves loving relatives. Consequently, it's natural and practically necessary that resource distribution should start with those nearest to us. When there's insufficient food to save both our nearest

relatives, neighbors, and strangers, we must prioritize our nearest relatives.

An essential lesson from Confucian virtue ethics is that there should be a clear and definite order, distinction, and differentiation in the deliberation and implementation of virtues. Justice as an institutional virtue derives from justice as a personal virtue. Among all personal virtues, benevolence is most fundamental. It motivates political decision-makers to make appropriate decisions and, more importantly, justifies the degrees of love and their related expressions. Consequently, Confucians would argue that the ethical principle based on benevolence should take priority when political undertakings of public health issues conflict with ethical principles. In public health practice, not sharing anti-epidemic supplies with neighbors is justified only if the decision stems from benevolence; it's unjustified if based solely on political considerations such as political agendas, economic interests, or national security.

In conclusion, developing public health virtue ethics is promising. MacKay's paper insightfully outlines the contributions of institutional virtues to public health issues. Aristotle-based virtue ethics avoid applying thin ethical rules like libertarian or utilitarian principles to complex public health issues. However, limitations remain. Responding to her invitation for critiques and dialogues from scholars with different intellectual foundations, I introduce Confucian virtue ethics to the discussion, hoping this will foster a deep and rich area of intellectual and practical development.

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