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ON IGNORANCE AND BLISS:
AN ANALYSIS OF THE APPLICABILITY OF RAWLSIAN THEORY
AS A MODEL FOR ETHICAL DECISION-MAKING IN TRIAGE
SCENARIOS

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ABSTRACT:

The paper uses economic game theory to investigate whether John Rawls' philosophical position makes adequate provisions to render it capable of handling triage scenarios in the developing world. It provides an overview of the Rawlsian approach to social justice issues and focuses specifically on the application of his theoretical veil of ignorance as a tool, used to strip people of undeserved material advantages and to guide ethical decision-making. Some critics have argued that Rawls' position is sound in theory, but realistically impotent when handling the conditions of extreme scarcity that often characterize community crises. An assessment of a theoretical example of a triage scenario that calls for definition of a model of delivery for limited vaccinations in a population. Analysis of this situation using economic game theory provides evidence that outcomes of choices made by ethical decision makers under the veil ultimately prove beneficial for the community at large. This suggests that Rawls' rhetorical position can effectively be used to guide ethical decision-making in times of crisis under realistic conditions of moderate scarcity.

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I. INTRODUCTION

January 12, 2010 will be forever remembered as a day on which less than 60 seconds of seismic activity created ripples of damage that contributed to the deaths of approximately 230,000 Haitians and left their country in social and cultural shambles (“Haiti before the earthquake,” 2010). Prior to the earthquake, Haiti had already been identified as the poorest nation in the western hemisphere and was cited as one plagued by crippling burdens including political instability, environmental degradation, epidemiological crisis, developmental stagnation, and general corruption. As of 2009, approximately 65% of Haitians lived below the international poverty line and only 58% of the total population was purported to have access to potable water (2010). Evidence suggests that approximately 33% of the population lacked food security, 22% suffered from chronic malnutrition, and 81% could not access sanitation facilities regularly (2010). The country’s social infrastructure at the time was not stable enough to adequately support and address the needs of the Haitian people, and the evident disparities between the richest and poorest portions of the population only exacerbated social problems.

The earthquake had a profound and immediate impact on the already strained state of affairs in Haiti. This single incident decimated almost one third of the country’s total population and left another 300,000 Haitians injured. Economic estimates suggest that it generated anywhere from 8 to 14 billion U.S. dollars in damages; social scientists are still assessing the full extent of its ramifications on the mental and social health of individuals and broader communities. From a structural

standpoint, the quake destroyed 60% of the country's hospitals and 23% of its schools ("Haiti before the earthquake," 2010). Essentially, it affected the already limited emergency preparedness and public support networks designed to provide stability when threatened by severe natural disasters. The earthquake constituted a seemingly insurmountable setback for Haiti, a country desperately lacking adequate resources necessary to respond to a catastrophe of this magnitude quickly and efficiently.

When a population's needs overwhelm its capacity to completely attend to all its constituents, people are forced to make difficult decisions about how to best allocate scarce resources in response to a crisis. Triage is the term used to describe and encompass methods by which medical resources are distributed under these conditions of scarcity (Iverson & Moskop, 2007). Some present triage as, "...the prioritizing of patients according to injury severity and the need for immediate care....The challenge of triage...is to identify that small minority of critically injured casualties who are salvageable in the face of limited resources (Born, et al., 2007)."

Triage scenarios can take on a variety of different forms and can be categorized relative to any of a number of defining characteristics. Often times, identification or labeling of a triage scenario depends on the specific circumstances that frame the event; these may include the amount of resources available, the number of people in need of aid, and the determined method of resource allocation. Some common types of triage situations include ED (emergency department)/ ICU (intensive care unit) cases, localized disasters, war-related threats, natural disasters, and "multicasualty incidents (Iverson & Moskop, 2007)." Generally, care providers

place patients in need of assistance into one of the following four categories; these hierarchical designations help triage officers determine how to prioritize dedication of time and allocation resources to people in need (Born, et al., 2007):

- (1) **Immediate**—those most severely injured who require urgent, life-saving treatment
- (2) **Delayed**—those who are not in immediate need of treatment, including the walking wounded
- (3) **Expectant**—those whose extensive injuries would require time and significant resource utilization and whose elevated care requirements would jeopardize the lives of many more salvageable casualties
- (4) **Dead**

Developing a predetermined plan for administering care to people in each of these categories helps ensure that complex situations are handled in organized ways; unfortunately, assigning these labels to people whose conditions may represent some gradient between such strictly defined states can be subjective and therefore difficult.

In emotionally overwhelming or complicated situations, having a model to guide difficult decision-making can ensure that outcomes are determined through ethically sound and appropriately objective consideration. While the capacity for decision-making is a distinguishing characteristic of highly developed and sentient societies, choices are subject to various forms of bias. Compromising situations often present challenging questions of practicality, possibility, and morality that are hard to respond to with complete objectivity. Personal perspectives on issues of morality and ethics are heavily influenced by individual experiences, preferences,

and practices; in essence, there rarely exists a predefined and universally applicable approach to tackling complex or controversial ethical issues. A key feature of the human condition is the natural tendency to protect one's self and serve one's own best interests; this can interfere with people's ability to respond fairly in situations that set the divergent needs of individuals or groups in opposition.

Philosophers recognize the concept of fairness as one of the major fundamentals of ethics and have made multiple attempts to understand and articulate its essential components. One such philosopher, John Rawls, is academically renowned for his ideological position as most completely expressed in his *Theory of Justice*. Rawls dedicated much of his work to examining the impact of the relationship between justice and fairness on moral, social, and political grounds. Despite the intellectual quality and theoretical value of his work, critics have scrutinized his position and have challenged its ability to be used as an effective guideline for moral thinking and decision-making when applied in certain scenarios.

The characteristic tenets of Rawlsian theory contradict several major philosophical positions and have been challenged by critics supporting various schools of thought. One of the enduring attacks against Rawls suggests that his original position is incapable of providing insight into the appropriate handling of triage situations, including cases in which a potentially large number of individuals needs serious or life-saving treatment despite the fact that material goods and funding necessary to provide this treatment remain limited (Shevory, 1986). As a result, some people are granted the opportunity for continued life while others

inevitably die. The burden of prioritizing individuals in need of care unfortunately is left in the hands of other people whose personal experiences, circumstances, and biases influence their decisions. In these instances, moral decision makers may seek to utilize legal and ethical frameworks to help determine how to most appropriately allocate limited medical resources. Rawls' theory could serve as one such guide for responding ethically to these situations but it has been suggested that his work, while sound in theory, is flawed in application.

In his article entitled, "Applying Rawls to medical cases: an investigation into the usages of analytical philosophy," scholar Thomas Shevory explains that inconsistencies in people's interpretations of Rawls' original position prevent it from being broadly and effectively applied when dealing with realistic health care issues. Shevory's paper presents others' critiques of Rawls' work; he specifically comments on the differences between the ways critics including Ronald Green, Norman Daniels, James Childress, Marc Basson, and Gerald Winslow use Rawlsian theory as the basis for evidence to support the (seemingly contradictory) philosophical positions they each advocate. (Shevory, 1986)

Rawls' critics fail to recognize that the circumstances of justice he articulates in his work provide the key for applying his theory of distributive justice to real world situations. These scenarios are often difficult to respond to, both from logistical and moral standpoints, but developing a firm understanding of the true nature of triage in conjunction with a just means of determining patterns of action can ensure that people handle them efficiently and ethically.

II. LITERATURE REVIEW

Introduction to Ethics

In order to accurately apply the Rawlsian perspective to real situations in modern contexts, it is necessary to understand the development of his position in its original theoretical and historical contexts. The work of John Rawls is firmly rooted in ethical theory. The study of ethics raises questions that require consideration of value judgments and personal opinions. Ethics serves as a means of answering these questions from a moral perspective; it is just one lens through which life can be examined, comprehended, and explained. It functions almost as a code that outlines appropriate standards of engagement and interaction between human beings. The study of ethics provides ways of better understanding and justifying the actions of individuals, who determine how to behave based on their own beliefs and values; ethical theory acknowledges that people are inherently flawed, and it helps provide insight into their inclinations to take certain actions including those that may be deemed unexpected or unacceptable. (Beauchamp & Childress, 2001)

Generally, a behavior or action cannot be considered in an ethical context if it interferes with those rights generally deemed inalienable among all humans. More specifically, a behavior must at minimum fit the following principle requirements to be labeled ethical: (1) it must not cause harm of any type to another individual, (2) it must not interfere with another individual's autonomy, and (3) it must uphold justice, thereby not generating an ethical conflict of greater magnitude or violate another major ethical principle. (Beauchamp & Childress, 2001)

Normative ethics examines the application of moral guidelines or expectations to practical situations, and offers multiple suggestions for approaching ethical questions or conflicts. Different philosophical perspectives espouse different guidelines for ethical decision-making, based on the relative value they assign to each of these three criteria. Understanding the priorities advocated by each perspective provides a context in which John Rawls' position can be examined and clarified, relative to other schools of thought.

Theoretical Frameworks

Naturalism and Virtue Theories

Virtue theories of ethics, often considered neo-Aristotelian theories of naturalism, support the idea that morality is not solely defined by a specific code of conduct; becoming a truly ethical being requires first developing an unfailing personal sense of virtue (Graham, 2004). Someone adopting a personal philosophy aligned with virtue ethics might generally believe that people who develop a stable and comprehensive sense of morality learn to always observe their moral code and to behave in accordance with it; therefore, their demonstrated actions are inherently and inevitably ethical. Virtue theories place heavy emphasis on personal character and integrity as primary guides for moral behavior.

Kantianism and Duty Theories

In contrast, duty (or deontological) theories purport that morality is based on predefined expectations and obligations that are somewhat universal to all human beings. Different variations on this position place different value on these duties to God, to oneself, and to the community. People who adopt deontological positions

generally believe that if others fulfill all of their duties, as defined by an assumed or accepted moral code of conduct, they have acted ethically. Duty theory serves as the foundation for Immanuel Kant's work; Kant, a prominent philosopher, argued that ethical decision-making should be based on "duty for the sake of duty alone," instead of personal inclination or tendency. (Graham, 2004)

Ethical thinkers universally accept that autonomy is an inviolable human right; any act that interferes with an individual's autonomy is therefore immoral. Sometimes categorized as a branch of deontological theory, the classical liberalism or "rights" approach prioritizes this autonomy above moral obligation to others. Classical liberalism provides people with a platform for justifying their actions against others' based on their entitlement to certain human rights; it acknowledges that individuals have a civic duty to help those in need, but note that this duty need not be observed if it interferes in some way with the personal or private rights of the individual decision maker.

Deontological positions characterize society as,

"...being composed of a plurality of persons, each with his own aims, interests, and conceptions of the good..., is best arranged when it is governed by principles that do not themselves presuppose any particular conception of the good; what justifies these regulative principles above all is not that they maximize the social welfare or otherwise promote the good, but rather that they conform to the concept of right, a moral category given prior to the good and independent of it (Sandel, 1999)."

In contrast, John Rawls argues that some people should provide for the needs of others, regardless of whether they deserve to retain personal rights to their property, time, and resources.

Utilitarianism and Consequentialist Theories

Consequentialists accept that morality is defined by outcomes and implications rather than intentions; according to these schools of thought, motivating factors need not be considered in ethical debates as long as the consequences are deemed ethical (Graham, 2004). Individuals seeking to make decisions in accordance with this position use cost-benefit analysis to assess conduct and determine whether the potential outcome of a given situation is ethically justifiable. This school of thought supports the idea that if people's decisions and behaviors result in morally sound outcomes, the means by which they were generated are justifiable and the individual actors behaved ethically.

The utilitarian approach to ethics seeks to maximize efficiency and overall public utility, in order to ensure the greatest good for the largest number of people (Fieser, 2009). Notable utilitarians include philosophers John Stuart Mill and Jeremy Bentham. Rawls argues that this treatment of individuals only as parts of a greater public is unethical and he suggests that utilitarianism unduly places greater value on certain individuals' benefits relative to others' burdens; he writes, "...there is no reason in principle why the greater gains of some should not compensate for the lesser losses of others; or more importantly, why the violation of the liberty of few might not be made right by the greater good shared by many (Rawls, 1971)."

Contractarianism and Rawlsian Theory

Social contract theories constitute a branch of ethics that acknowledges the role of structure in the formation of an ethical society. These theories are based on the recognition that people living in communities willingly opt into a social contract

and thereby accept it as the basic structure of their society, assuming they will personally benefit from this association. The contract delineates both the social order and moral code for the society, and therefore dictates the ethics of human interaction (Graham, 2004). People adopting these positions accept that the social contract defined the socially accepted moral guidelines; if community members act in accordance with the code, their actions are automatically deemed ethical. It is important to note that, while these positions are sound in theory, they can be misconstrued and used to justify behaviors that are undeniably unethical but deemed acceptable relative to a defined social code; examples of this include the inhumane treatment of people in Nazi Germany and apartheid South Africa (Bayles & Robinson, 2002).

The work of John Rawls reflects the key tenets of contractarianism and his writings include commentary on the basic structure of society as well as the importance of cooperation among community members. Rawls writes,

“Our topic... is that of social justice... the primary subject of justice is the basic structure of society, or more exactly, the way in which the major social institutions distribute fundamental rights and duties and determine the division of advantages from social cooperation ... The basic structure is the primary subject of justice because its effects are so profound and present from the start. The intuitive notion here is that this structure contains various social positions and that men born into different positions have different expectations of life determined, in part, by the political system as well as by economic and social circumstances... the institutions of society favor certain starting places over others. These are especially deep inequalities... they affect men’s initial chances in life; yet they cannot possibly be justified by an appeal to the notions of merit or desert. It is these inequalities, presumably inevitable in the basic structure of any society to which the principles of social justice must in the first instance apply (Rawls, 1971).”

Introduction to Rawlsian Ethics

Rawls' success is, in part, a product of the social context in which he presented his work and the prevailing cultural dynamics of the time. During a progressive period in history in which people were open to change and seeking new avenues of understanding, his position offered something novel and appealing; his approach to social injustices resonated with popular opinion of the time, which championed anti-war initiatives and challenged threats to the protection of women's and civil rights. In general, Rawls' work was unprecedented in that it approached desire and intuition, innately motivating factors, in a systematic and logical way. This contributed to his popularity because his work did not seek to ignore human complexities or conceal weaknesses, like instinct and inclination. He instead distilled these constructs and incorporated them into his framework, which could then be used to help address and answer difficult theoretical and practical questions.

Another popular feature of Rawls' work was its applicability: he wanted his position to be realizable and his proposals to be feasible. Certainly, he was not intending to develop a philosophically sound, yet realistically impotent, position: "The *original position* aims to move from these abstract conceptions to determinate principles of social justice. It does so by translating the question 'What are fair terms of social cooperation for free and equal citizens?' to 'What terms of cooperation would free and equal citizens agree to under fair conditions?' (Wenar, 2008)."

Regarding *A Theory of Justice*, Kukathas and Pettit write, "...it breaks cleanly with the preference of philosophers in the previous half-century for the analysis of

ethical ideals and principles rather than an exploration of which ideals and principles to advocate (Kukathas & Pettit, 1990).”

This piece is heralded as one of Rawls’ most defining works, and its 1971 publication is often identified as the highlight of his career. It constitutes the first mature presentation of his “justice as fairness” idea and outlines his key principles of justice, which he describes, “...as those which rational persons concerned to advance their interests would consent to as equals when none are known to be advantaged or disadvantaged by social and natural contingencies (Rawls, 1971).”

Despite his acclaim, Rawls has received a considerable amount of attention from critics. One of the general criticisms of Rawls is his individualistic approach; he presents a position that considers a society as a, “...self-sufficient association of persons who in their relations to one another recognise certain rules of conduct as binding and who for the most part act in accordance with them (Rawls, 1971).” Ethicists argue that such an association is only acceptable if the social contract in place is beneficial for all individuals participating. Certainly, the extent to which this is true varies relative to certain circumstances. Supporters of both the communitarian and utilitarian perspectives present this criticism of Rawls’ work, because it fails to consider the communal nature of human beings or to recognize the value of public good.

Another key criticism of Rawls is his supposed advocacy for the rights of some individuals, often those most marginalized, and his simultaneous disregard for the rights of others. This clearly conflicts with the interests of classical liberalists,

who would argue that it is inappropriate to prioritize the needs of the least advantaged while ignoring the personal and property rights of those with means.

Overview of Rawls' Original Position

In his *Theory of Justice*, Rawls outlines the principles he deems necessary to encourage the development and enable the maintenance of a truly just society. He notes that decisions about these principles must be made impartially and agreed upon in advance by consenting members of the social contract, in order to secure it in an ethical way.

His conception of justice is based on the premise of social cooperation. His position represents an extension of social contract theories as put forth by philosophers including Locke, Hobbes, and Rousseau; by definition, a social contract is conceived of by consenting members of a society who opt to participate in a mutually beneficial community, intending to protect their own self-interests. Rawls describes the development of a social contract in the following way:

“We are to imagine that those who engage in social cooperation choose together... the principles which are to assign basic rights and duties and to determine the division of social benefits. Men are to decide in advance how they are to regulate their claims against one another... Just as each person must decide by rational reflection what constitutes his good, that is, the system of ends which it is rational for him to pursue, so a group of persons must decide once and for all what is to count among them as just and unjust. The choice which rational men would make in this hypothetical situation of equal liberty... determines the principles of justice (Rawls, 1971).”

Rawls suggests that justice is not worth considering without some cooperative relationship against which human interaction can be measured and examined. He says,

“... we are not to think of the original contract as one to enter a particular society or to set up a particular form of government. Rather, the guiding idea is that the

principles of justice for the basic structure of society are the object of the original agreement. They are the principles that free and rational persons concerned to further their own interests would accept in an initial position of equality as defining the fundamental terms of their association. These principles are to regulate all further agreements; they specify the kinds of social cooperation that can be entered into and the forms of government that can be established. This way of regarding the principles of justice I shall call justice as fairness (Rawls, 1971)."

His position supports other social contract theories, while validating the idea that humans are innately self-interested and are motivated to enter into such contracts based on personal welfare; he seems to combine complementary elements of deontological and contractual theories.

In order to counteract the inequities resulting from personal bias, his position suggests that those seeking to make impartial decisions do so as if under a "veil of ignorance." Based on this premise, he discourages ethical thinkers from making judgments according to potentially "undeserved material advantages." Examples of these factors include gender, race, socioeconomic status, wealth, illness, etc. They are characterized as influencing attributes that have not explicitly been earned, but that continue to serve as the basis for an inequality. His theory assumes that most of life's inequality arises as a result of the distribution of such unearned privileges; hence, it is unfair to consider these factors when determining how to distribute resources in a fair and ethical way.

"... no one know his place in society, his class position or social status, nor does anyone know his fortune in the distribution of natural assets and abilities, his intelligence, strength, and the like... The principles of justice are chosen behind a veil of ignorance. This ensures that no one is advantaged or disadvantaged in the choice of principles by the outcome of natural chance or the contingency of social circumstances. Since all are similarly situated and no one is able to design principles to favor his particular condition, the principles of justice are the result of a fair agreement... (Rawls, 1971)."

Under his theoretical “veil” individuals are stripped of such undeserved characteristics that could otherwise sway decisions, and are forced to act impartially by weighing their own interests equally against the interests of their peers. Disregarding biases that would otherwise persist enables people to make morally acceptable and appropriate decisions. According to Rawls’ position, the resultant outcome often benefits the least advantaged individuals in a society. It is based on the assumption that, ignorant of his own circumstances, each person will act conservatively and opt to aid the worst off individual in the event that he himself ends up facing this disadvantage. In doing so, each is likely to act in ways that serve his own best interests while simultaneously working to the advantage of other members of the social contract; the veil eliminates the element of competition because it strips all people of undeserved advantages and subjects them to identical circumstances. According to David Gauthier, creator of a different contemporary social contract theory, the nature of Rawls’ veil ensures that there is only one possible outcome. Further, it averages people in such a way that there is only one rational agent; all are expected to assume the same decision-making identity under the veil (Gauthier, 1986).

Ideally, the resulting outcome should prove communally beneficial because use of the veil ultimately supports decisions that provide for the most disadvantaged individual in a community. Hence, Rawls’ position encourages ethical behavior because it supports both vertical and horizontal equity, as labeled by Margaret Whitehead; it suggests equal treatment of people based on a standard set of circumstances but ultimately results in an outcome that supports the least

advantaged (or most disadvantaged) members of a society (Whitehead, 1991). This is clarified by his presentation of each of the following principles, which he identifies as key elements of the original position (Rawls, 1971):

“Each person is to have an equal right to the most extensive basic liberty compatible with similar liberty for others.”

“Social and economic inequalities are to be arranged so that they are both (a) reasonably expected to be to everyone’s advantage, and (b) attached to positions and offices open to all...”

Some suggest that fulfillment of the first principle, which supports horizontal equity by advocating equal basic rights for individuals in similar positions, should be prioritized over the second, a vertically equitable practice that justifies inequalities beneficial to the worst off in a society. It has also been argued that, “...within the second principle fair equality of opportunity takes priority over the difference principle (Wenar, 2008).”

In an ethical system also subject to individual-specific whims, it is difficult to decide what makes someone more or less entitled to care because such judgments are highly subjective and are based on personal values. Some schools of thought suggest that resources are most appropriately dispensed on the basis of what can be afforded, as with the libertarian perspective, or based on the method of allocation that ensures the greatest good for the most people, like the utilitarian perspective.

The *difference principle* is the element of the Rawlsian perspective that serves as its material principle of distribution; that is, it dictates who receives resources and on what basis. Part of his second principle of justice, Rawls’ difference principle tackles the issue of inequality present in every society. “It requires that

social and economic institutions be arranged so as to distribute income and wealth, and powers and positions of office so as to maximize the share that goes to the least advantaged members of society...(Freeman, 2007).”

III: GAME THEORY APPLICATION

With every passing second the global population grows and changes, increasing the pressures imposed on our environment and our world. Any competent economist recognizes that, in a society influenced by economic forces, all resources are scarce including those needed for the provision of medical care. Given a growing population and a fixed number of resources, it is impossible to fill the needs of every individual. Inevitably, some will not receive needed services.

This growing global population is also more mobile as a consequence of globalization; the spread of people and therefore disease has been facilitated. Highly communicable and harmful diseases, like HIV/ AIDS and drug-resistant Tuberculosis, proliferate because the cost of treatment is high and containment is difficult. This creates a scenario in which a potentially unlimited number of individuals are in need of serious or life-saving treatment, while the material goods and funding necessary to provide treatment remains limited. These situations of triage medicine require that some live while others do not. Unfortunately, the burden of prioritizing individuals is not arbitrary but rather left in the hands of fellow humans. Faced with the decision of who to treat and who to essentially let die, it is exceedingly difficult to delineate the moral and also legal guidelines for the appropriate allocation of medicine.

Denying health care to a person often compromises his chances of survival, directly or indirectly jeopardizing his life. This act of doing harm to an individual contradicts a major ethical principle. In order to justify this unethical act it is

necessary to determine a fairer way of allocating resources among the many people who need care, calling into question the principles of distributive justice.

Rawls' original position assumes that justice is considered in a society in which all humans exist within a normal range of functioning; this suggests a minimum level of capacity at one end of the spectrum and complete mortality or vulnerability at the other (Freeman, 2007). Rawls also presumes that, "...citizens are not only free and equal, they are also reasonable and rational (Wenar, 2008)."

Those who oppose the Rawlsian position argue that his "circumstances of justice" simply assume too much about the condition of a society, which renders his theory unrealistic or inapplicable to real life events. They recognize that his position may be valid in a utopia but contend that his work is flawed because it either ignores or intentionally overlooks the social and human injustices inevitable in reality. Triage medicine clearly is necessary only in a world plagued by need and subject to scarcity—both misfortunes that Rawlsian theory supposedly fails to consider. Therefore, Rawls' critics suggest that his original position is incapable of handling realistic issues of moderate scarcity, including triage, although they may agree with him in theory. Colin Farrelly attempts to articulate this critique and ultimately undermine Rawls by saying that his, "...cost-blind approach to rights coupled with the narrow view of human misfortune means that liberal theories of justice cannot address the issue of trade-offs that inevitably arises in real non-ideal societies that face the fact of scarcity (Farrelly, 2007)."

What these critics fail to recognize is that Rawls' circumstances of justice provide the key for applying his theory of distributive justice to real world

situations. Although many critique his stance, labeling it idealistic and inadequate, the veil of ignorance and the difference principle Rawls puts forth can in fact provide a basis for moral decision-making given the pressure of moderate scarcity. I intend to prove this through use of the following three arguments:

1) *Crises requiring triage medicine, like the global spread of HIV/AIDS and the transmission of drug-resistant Tuberculosis, **should be defined as problems of moderate scarcity** rather than extreme scarcity because they often follow a model that provides for compromise.*

2) *Even if triage situations are truly cases of extreme scarcity, Rawls would argue that the injustices they impose are abhorrent and that true moral agents would **take action to eliminate the condition of extreme scarcity**, replacing it with a more communally beneficial option.*

3) *Assuming that triage situations are problems of moderate scarcity (as determined in the first argument) **people will elect the least worst outcome for themselves under the veil of ignorance**, resulting in decisions made for the greatest benefit of the community at large and an ultimately ethical outcome.*

The Argument

The difference principle has a major flaw that critics label as the primary indication of Rawls' inability to handle triage situations. They argue that triage, a case of what they consider extreme scarcity, provides no outcome that serves as a middle ground. One of two individuals will live while the other inescapably dies; his life is only ensured at the inevitable expense of the other. In the case of a medical emergency, extreme scarcity implies a situation in which one person's advantage (the ability to receive treatment and ultimately live) comes at the absolute disadvantage of another. *Where moderate scarcity provides that inequality is acceptable as long as the basic needs of every individual are met, extreme scarcity necessitates that the basic needs of at least one individual are not met.*

These issues can be considered in terms of the rules of economic game theory, using the “prisoner’s dilemma” scenario. Game theory examines Jack’s tendency to make decisions based on his prior knowledge of Jill’s actions. Given this knowledge, Jack can choose the most personally advantageous option available *relative to Jill’s choice*. In a basic example, Jack can recognize that Jill is going to move right. Based on that knowledge, he can decide whether it is more personally beneficial to move right or left. This is the “cooperation” that Rawls’ premise of justice depends on. When this element of omniscience is removed from game theory, as it is under the veil of ignorance, both players are forced to act *without being able to anticipate the other’s choices*. In the same example, under the veil, Jack must make a purely personal decision because he lacks the ability to anticipate whether Jill will go right or left. This inability to weigh the consequences of each alternative in advance forces players to respond solely in favor of personal interests, regardless of outside influences. The following example places Jack and Jill in a triage situation, under the conditions of **extreme scarcity**:

Jack and Jill are two members of a community and are thus consenting members of its social contract. As a result, each is committed to this society only to the degree that it benefits his or her self-interest. Both parties are aware that their society is faced with an outbreak of drug-resistant Tuberculosis, and that the treatments collectively available to them are limited. Each is forced to make a decision about the just allocation of scarce medical resources based on this knowledge:

1) Both of them have equal potentiality of contracting the disease, under the veil of ignorance. Both are ignorant as to which of them will be infected.

2) There is a limited amount of medication. The outcome of this scenario could impact each of them in one of these ways:

Jack receives the full course of the drug treatment and will be entirely cured while Jill receives no medication. If Jill is found to be sick, she will die.

Jack receives no medication while Jill has access to the full course of the drug treatment. If Jack is found to be sick, he will die.

3) Each is aware of the other's existence and presence in the "game" but has no further knowledge of his or her circumstances.

In this case of extreme scarcity, if both are ill, it is inevitable that at least one of them will die while the other enjoys the medical treatment necessary to enjoy a full and happy life; the life of one comes at the necessary expense of the other. Rawls would argue that decisions made about how to appropriately allocate treatment should be made under the veil of ignorance, so neither party knows which of them will be infected. They have no basis for decision-making other than the circumstances given above and are forced between the two of them to determine who will receive treatment.

Under the veil of ignorance, neither Jack nor Jill knows which of them will need the medication because both are ignorant of their circumstances. The difference principle suggests that the medication clearly should go to the most "needy" individual. In this situation, the difference principle is ineffective because Jack and Jill cannot determine need at the time of decision-making. It is impossible to provide the best care for the most disadvantaged person if all people are equally disadvantaged; a hierarchy of need cannot be determined. Rawls' critics are correct in asserting that the difference principle is inapplicable here because both individuals are equally ignorant and equally needy. It is this failure that serves as the paramount weakness of the Rawlsian position because it renders his theory of distributive justice unable to handle this situation in which resources need to be justly allocated. *Essentially, if triage is in fact a case of extreme scarcity and the Rawlsian difference principle is rendered impotent in situations of extreme scarcity, his original position is thus inadequate in dealing with triage.*

The Counterargument

There is a great oversight on the part of these critics, however, who fail to recognize the true nature of triage medicine. Certainly, Rawls' theories would be inadequate in dealing with these scenarios if they were *true* cases of extreme scarcity; he admits to that in his initial commentary. However, the allocation of scarce medical resources seems to follow a pattern that closely resembles situations of moderate scarcity, in which case Rawls is well equipped to handle them. In the following example, consider a more accurate triage scenario:

Jack and Jill are two members of a community and are thus consenting members of its social contract. Therefore, each is committed to this society only to the degree that it benefits his or her self-interest. Both parties are aware that their society is faced with an outbreak of drug-resistant Tuberculosis, and that the treatments collectively available to them are limited. Each is forced to make a decision about the just allocation of scarce medical resources based on this knowledge:

1) Both of them have equal potentiality of contracting the disease, under the veil of ignorance. Both are ignorant as to which of them will be infected.

2) There is a limited amount of medication. The outcome of this scenario could impact each of them in one of these ways:

Jack receives the full course of the drug treatment and will be entirely cured while Jill receives no medication. If Jill is found to be sick, she will die.

Jack receives no medication while Jill has access to the full course of the drug treatment. If Jack is found to be sick, he will die.

Both Jack and Jill receive the minimum amount of medication necessary to ensure their survival (the short course drug treatment), which enables both to live at least temporarily within a normal range of functioning.

3) Each is aware of the other's existence and presence in the "game" but has no further knowledge of his or her circumstances.

In this case, the third option provides a “middle ground” that ensures that the basic needs of both will be met regardless of whether only one or both of them is ultimately found to be infected. This triage scenario seems to more accurately resemble the conditions of moderate scarcity, as opposed to extreme scarcity.

Triage medicine typically follows a model similar to this second example, in which a third option enables people to share their resources and attend to the basic needs of multiple individuals simultaneously. If this model is accurate, the Rawlsian position is equipped to handle triage because the hierarchy of need that the difference principle depends on is no longer relevant. That is to say, there is an option that provides for *everyone’s* needs to be met. *Essentially, if extreme scarcity does not provide for a middle ground but triage scenarios do, it is clear that triage scenarios are not good examples of extreme scarcity. Furthermore, if triage is truly not a case of extreme scarcity and Rawlsian theory is only inadequate in these situations of extreme scarcity, there may be a chance that Rawls’ original position is in fact capable of handling triage.*

Assume we have concluded that the first argument is false and that triage *is in fact a case of extreme scarcity*. Also, remember that consenting members of the social contract are expected to choose the most communally beneficial option when conditions allow collusion. Even given extreme scarcity, Rawlsian theory is not necessarily irrelevant because it still enables players to act in ways that eliminate this condition of extreme scarcity. If people are aware of their ability to control the magnitude of disparity, and they recognize that doing so eliminates an injustice, Rawls assumes that truly moral agents will make choices that combat this injustice.

Consider again the first scenario, in which Jack and Jill are faced with the dilemma of determining which of the two of them will receive treatment when only one can. Remember that neither has the knowledge of who is actually ill, so one unfortunate consequence of a decision to give Jack medicine is that Jack may not be the one who ultimately needs it.

Jack and Jill are two members of a community and are thus consenting members of its social contract. As a result, each is committed to this society only to the degree that it benefits his or her self-interest. Both parties are aware that their society is faced with an outbreak of drug-resistant Tuberculosis, and that the treatments collectively available to them are limited. Each is forced to make a decision about the just allocation of scarce medical resources based on this knowledge:

1) Both of them have equal potentiality of contracting the disease, under the veil of ignorance. Both are ignorant as to which of them will be infected.

2) There is a limited amount of medication. The outcome of this scenario could impact each of them in one of these ways:

Jack receives the full course of the drug treatment and will be entirely cured while Jill receives no medication. If Jill is found to be sick, she will die.

Jack receives no medication while Jill has access to the full course of the drug treatment. If Jack is found to be sick, he will die.

3) Each is aware of the other's existence and presence in the "game" but has no further knowledge of his or her circumstances.

In this case, assume that the first of the two options is chosen; Jack and Jill choose to offer Jack the full drug treatment. This can result in one of three outcomes. In the first scenario, the veil is removed and they find that Jack is in fact ill. Luckily, they have opted to save his life by providing him the full course of the medication he needs and Jill conveniently has no need for the drugs. The second result is that, upon removing the veil, we find that Jack is healthy and unaffected; Jill has unfortunately contracted the illness. Jill is left to die as a result of her lack of treatment and the medical resources are wasted on Jack. Finally, we remove the veil to find that both Jack and Jill are infected. Jack has been offered the drugs and Jill has not, once again leaving her for death. For the rest of this argument, consider the last scenario in which both contract the disease.

Recalling the previous determination that Rawlsian theory is incapable of handling extreme scarcity, it is unwise to attempt to make this decision from under the Rawlsian veil of ignorance. Removal of the veil makes evident the circumstances of both individuals and allows everyone to see and recognize their inequalities. Once Jill is in fact determined sick but denied treatment, Rawls assumes that a moral agent would recognize her need and take action to save her life. Doing harm to another individual is unethical, and denying Jill treatment in this case is essentially killing her; this does her harm and therefore constitutes an immoral act. Rawls would argue that an ethical decision-maker, given the option, would recognize this as an inequity and would take necessary steps to try to mitigate it.

The problem with this model is that it assumes both parties are simply willing to accept the outcome of their “game.” We are assuming that both Jack and Jill have agreed that they will adhere to their decision even after the veil is removed. Remember that a member of the social contract enters into the agreement only as long as it serves his or her best interests; in this case, Jill’s best interests are clearly not being served. Theoretically, once the veil is removed, Jill could very well revolt against her destiny and appeal to Jack to share his medication. Jack and Jill, no longer ignorant, would have the knowledge to recognize the disparity imposed by their situation. Knowing that they are both ill and could both benefit from the use of shared medical resources, it is possible they would choose to share the medicine amongst themselves in retrospect. Given the option, Jack and Jill could mutually choose the alternative that eliminates the condition of extreme scarcity,

replacing it with moderate scarcity by compromising and taking the “middle ground.” The resulting situation would probably look more like this:

Consider the same scenario, but assume that the veil is removed post-decision and Jack and Jill realize that they are both infected. With this new knowledge, they mutually agree on a third option; Jack and Jill choose to share their resources. The result is that neither receives the full course of the drug treatment, which would ensure a cure as well as a long life of good quality for that one individual. At the same time, neither is left for dead. The minimum needs of both are met and both are offered the short-term drug treatment, which ensures their survival within a normal range of functioning at least temporarily.

Assuming that Jack and Jill agree on this decision to share their resources, they recognize the injustice present in their situation and opt for the course of action that eliminates the condition of extreme scarcity. This example mirrors very real situations caused by the global spread of HIV/ AIDS. In these cases, we are not applying the veil of ignorance because we are already conscious of and considering the plight of people who have definitely been infected. We know that a growing number of people need treatment, and that our society currently operates under conditions of extreme scarcity because people continue to die. This is a consequence of our *choice* to dedicate only a limited amount of resources to combat the problem; hence, it is a feasibly avoidable inequity. Ultimately, we acknowledge that this contributes to the deaths of many people while the chosen few receiving treatment are saved. However, if we were to act morally, we would recognize that allowing mass numbers of people to die in this way constitutes an incredible injustice. Given the knowledge and power necessary to initiate change, many would opt to eliminate this condition of extreme scarcity by apportioning considerable amounts of money and resources to prevent the spread of HIV/ AIDS; we would be able to provide at least a minimum amount of care to every infected individual, thus filling

his basic needs and ensuring, at minimum, his temporary survival. We could address the disparity present and take steps necessary to prevent the loss of these lives by removing the conditions of extreme scarcity and replacing them with those of only moderate scarcity. Given that there is currently no definitive cure for these conditions, it seems this choice to save as many lives as possible is the next most optimistic goal and the one that should be sought.

For this final argument, assume that cases of triage are in fact situations of moderate scarcity, as addressed in the first argument. Again, this assumes that there are enough resources to fill the basic needs of every individual, even if that means another person cannot necessarily have everything he desires. A well endowed or advantaged person may need to share his resources in order to ensure that the needs of another are met; however, this comes at no expense to himself because he is only expected to share what he has *exceeding the amount of resources needed to fill his own basic needs*. In these situations, the Rawlsian veil of ignorance is entirely effective as a means for eliminating bias and arriving at the best outcome for an individual and society on the whole. In this way, using the veil of ignorance results in ethically sound decision-making.

First, consider a society trying to make these decisions without the using the veil of ignorance. Assume that all individuals, to some degree, have the knowledge and ability to act in response to the behavior of others. For the sake of this argument, valuable resources in this society are distributed according to wealth.

Jack and Jill are two members of a community and are thus consenting members of its social contract. As a result, each is committed to this society only to the degree that it benefits his

or her self-interest. Both parties are aware that their society is faced with an outbreak of drug-resistant Tuberculosis, and that the treatments collectively available to them are limited. Each is forced to make a decision about the just allocation of scarce medical resources based on this knowledge:

- 1) Both of them have equal potentiality of contracting the disease, under the veil of ignorance. Both are ignorant as to which of them will be infected.*
- 2) There is a limited amount of medication. The outcome of this scenario could impact each of them in one of these ways:*

Jack receives the full course of the drug treatment and will be entirely cured while Jill receives no medication. If Jill is found to be sick, she will die.

Jack receives no medication while Jill has access to the full course of the drug treatment. If Jack is found to be sick, he will die.

Both Jack and Jill receive the amount of the medication necessary to ensure their survival (the short course drug treatment), which enables them both to live at least temporarily within a normal range of functioning.

- 3) Each is aware of the other's existence and presence in the "game" but has no further knowledge of his or her circumstances.*

4) Each knows that societal standards mandate the allocation of medical resources according to affluence; those who can afford treatment will receive it.

Assume that the full course drug treatment is more expensive than the short course and that Jill is a doctor, born into a higher socioeconomic status than Jack. In this case, her money and job title give her absolute authority as the decision-maker, according to societal standards. When given the decision to treat Jack or not, Jill is aware of the fact that she has the equal potential for illness and may need treatment. She recognizes that she only has enough of the drug to fully treat one individual. Therefore, giving Jack the full amount of medication may prevent her from getting the care she needs. Jill knows that her society operates on principles that provide care to those who can afford it. Acting in her best interests, she purchases the full treatment and saves her own life. Regardless of the outcome, Jill accepts that Jack may die at her expense and provides for herself everything that she wants regardless of whether or not his basic needs are met.

Although her decision follows the standards of her society, it indirectly does harm to another society member. By acting her own best interests, she denies Jack

the medication he needs and indirectly does harm to him by enabling his death.

Acting according to a code of bioethics requires avoiding decisions that cause harm to another person. Jill was not necessarily anymore deserving of care than Jack as a result of her own actions or control. She was simply born into a larger amount of wealth, which gave her the means to afford care and ultimately deny Jack the right to live. The use of undeserved material wealth as a basis for defining distributive justice is unethical, because it causes harm to another person. Society on the whole does not benefit from an individual's decision to pursue his own interests in this way.

Now consider the Rawlsian perspective, which places the two players once again under the veil. This time, determinations are made impartially, which prevents undeserved material factors like wealth from being considered as part of the decision-making process. The scenario, once again:

Jack and Jill are two members of a community and are thus consenting members of its social contract. As a result, each is committed to this society only to the degree that it benefits his or her self-interest. Both parties are aware that their society is faced with an outbreak of drug-resistant Tuberculosis, and are aware that the treatments available to them are limited. Each is forced to make a decision about the just allocation of scarce medical resources based on this knowledge:

1) Both of them have equal potentiality of contracting the disease, under the veil of ignorance. Both are ignorant as to which of them will be infected.

2) There is a limited amount of medication. The outcome of this scenario could impact each of them in one of these ways:

Jack receives the full course of the drug treatment and will be entirely cured while Jill receives no medication. If Jill is found to be sick, she will die.

Jack receives no medication while Jill has access to the full course of the drug treatment. If Jack is found to be sick, he will die.

Both Jack and Jill receive the amount of the medication necessary to ensure their survival (the short course drug treatment), which enables them both to live at least temporarily within a normal range of functioning.

3) Each is aware of the other's existence and presence in the "game" but has no further knowledge of his or her circumstances.

Outside the veil, Jill may have been offered full treatment because she is a woman or Jack may have been denied treatment because he is black in a world where white privilege still exists. Rawls would argue that these characteristics have certainly influenced the lives of Jack and Jill, but not as a result of their own control; however, under the veil, these factors no longer come into consideration. Lacking a differential inequality on which to base their decisions, Rawls would argue that Jack and Jill will act in their own best interests and ultimately encourage the greater good.

Rawls suggests that his original position serves as the, "...*maximin solution* to the problem of social justice. 'The maximin rule tells us to rank alternatives by their worst possible outcomes: we are to adopt the alternative the worst outcome of which is superior to the worst outcomes of the others' (Farrelly, 2007)." Essentially, individuals acting in their own best interests will favor the most conservative option because it is likely to guarantee the *least worst* outcome for themselves. In effect, people prepare themselves by choosing the best potential outcome given the worst-case scenario. The ignorance applied by the veil forces every person carrying this responsibility to consider that *he* eventually may be the person needing care. Neither Jack nor Jill knows who will contract the disease and ultimately need

medication; however, neither wants to be the unfortunate soul that does and is left to suffer while the other benefits from full medical care he may not necessarily need. Under the circumstances, each is likely to choose the option that provides him with at least some security rather than risking his own death. Both Jack and Jill will choose the option that guarantees a minimum amount of care for both, supporting the idea that they opt for the alternative that eliminates the condition of extreme scarcity; thus, this serves an example of moderate scarcity.

The basis for Rawls' theory suggests that all questions of distributive justice need to be addressed as if from the perspective of an impartial bystander. In order to truly act impartially, this individual must be totally ignorant of the factors potentially influencing his decision. Inability to favor one person over another based on unearned advantages implies that all are treated as equals, *including the decision maker*. This also implies that all are equally ignorant and equally impartial within the society. The above example asserts that true impartiality forces Jack to advocate personal interests. If this is accurate, then all individuals under the veil are doing the same. Jack and Jill are regarded as equals so we expect that Jill is also advocating her personal interests. All are equal and all are working toward the same goal; disregarding undeserved material factors, Jack makes a personally beneficial decision that should be similarly beneficial for Jill if she stood in his shoes. It can be concluded that the goal is ultimately communal and the best outcome for one will result in the best outcome for all the others. An individual serving his best interests will be serving the best interests of society on the whole.

This method of distribution is fair because the best option for one individual, personal characteristics and preferences aside, should be the best option for another. In seeking the greatest good for himself, a person guarantees that his choice will have been in the best interests of all others deemed his equal, were they in his shoes. If everyone works for the best interests of a generic individual in the society, the best interests of the community are served and no one is intentionally harmed. Therefore, applying this method of distributive justice to the issue of the allocation of medical resources in a society is communally beneficial and ethical.

IV. DISCUSSION:

It is necessary to consider some of the weaknesses of Rawls' veil as a tool that can be universally applied. Approaching situations as if all players begin on an equal playing field can be beneficial, because it provides an opportunity for decision-makers to be relatively magnanimous and unbiased when choosing courses of action. That said, Rawls' veil does not account for important historical differences and precedents that influence the context in which these scenarios need realistically be assessed. Failing to consider these levels of influence, which may arise due to circumstances beyond the control of people either acting ethically or unethically, constitutes a shortcoming that detracts from the general applicability of his veil in all situations.

Additionally, John Rawls' broader body of work neither addresses triage nor general health-related issues in a direct way. Shevory argues that this constitutes an "analytical flaw" in Rawls' reasoning and serves as sufficient evidence that the tenets advocated for in Rawls' *Theory of Justice* should not be used to help address questions related to these kinds of ethical conflicts (Shevory, 1986). He cites inconsistencies in peoples' applications of Rawls' work as proof of its ineffectiveness; he does not comment on the degree to which the arguments made by each of these critics are rhetorically sound, or on the extent to which offered criticisms may have been derived based on personal assumptions or inaccurately drawn conclusions (confirmed only by face validity).

Future studies or literary reviews could be developed to assess the degree to which each of these critics has interpreted Rawlsian theory in a literal and accurate

way, or conversely the degree to which they have exercised the flexibility of his position to falsely support their own personal aims.

In attempting to confirm the conclusions drawn in this paper, it would be helpful to develop an empirical study that could provide insight into whether the theoretical outcomes of the “game” presented above would actually be realized as anticipated. Additionally, it would be helpful to identify or develop another type of game or tool that could be used to test peoples’ decision-making tendencies under a simulated veil of ignorance; were the scenarios to play out similarly under every outlined set of circumstances, Rawls’ position would be more easily identifiable as one that is consistently effective.

While investigating these theoretical concepts could help provide support for Rawls’ work, conducting analyses of actual scenarios would more completely legitimize his position as one that is realistically applicable. The extent to which Rawls’ theory could have been used to guide those responding to the Haitian earthquake is worth exploring; this knowledge could provide valuable insight into effective ways of referring to Rawls’ (and other similar) guiding principles while addressing comparable crises in the future.

Given that the Haitian government was relatively unstable and decentralized at the time of the earthquake, there were very few reliable emergency response mechanisms or branches of a public health infrastructure in place (Pinto, 2010). As a result, relief efforts tended to be independently driven and showed little evidence of collective coordination or cooperation. Much of the aid that flooded into the country came from outside sources, operating in silos, and it was offered directly to

members specific communities instead of being channeled through umbrella organizations or authoritative institutions. Many emergency care providers came from outside of the country and may not have understood the full significance of the country's historical development or felt the full weight of burdens imposed on Haitians, whose communities were literally and figuratively devastated by the quake (2010).

Given their level of personal disconnectedness from the direct effects of the situation, some aid workers may have been forced to make decisions about modes of allocating scarce resources without ever having functioned as members of the Haitian social contract. Rawls' veil could have been used as a model to downplay elements of this specific situation that would not be meaningful or relevant to outside decision-makers. Ultimately, distilling the complex situation in this way could have helped ensure that those offering help were making decisions based solely on ethical grounds rather than allowing personal biases or assumptions to obscure the foundations of their choices.

V. CONCLUSION:

To conclude, critics of John Rawls suggest that his original position does not make the provisions necessary to serve as a consistently effective model for ethical decision-making in triage scenarios. If these scenarios are always approached as cases of extreme scarcity, which render cooperation between people unattainable, Rawls' theory of distributive justice is in fact rendered useless; by definition, Rawlsian justice can only be achieved when cooperation is possible. This would suggest that Rawls' principles of justice cannot be observed in cases of extreme scarcity. This would also render his difference principle useless, because this element of his theory is based on a hierarchy of need that cannot be determined under the pressures of extreme scarcity, when the implication is that all individuals are equally needy. Critics suggest that these flaws in principle provide evidence of the inapplicability of Rawls' original position when responding to crises under the conditions of triage.

These arguments fail on three accounts. Critics accurately suggest that the Rawlsian perspective is inadequate when dealing with conditions of extreme scarcity; Rawls admits to that in his writings (Rawls, 1971). However, they inappropriately label triage as a case of extreme scarcity when it more accurately follows a model of moderate scarcity. Extreme scarcity results in one person's gain only at the expense of another's and provides for no "middle ground." In contrast, triage scenarios often present a potential outcome that enables compromise, therefore suggesting that triage scenarios may be more appropriately categorized as examples of moderate scarcity. If Rawlsian theory is only ineffectual under the

circumstance of extreme scarcity and triage is in fact not one of these cases, it is possible that Rawls' position may realistically be equipped to handle triage medicine.

Secondly, even if triage continues to be classified as extreme scarcity, Rawls would argue that an opportunity still exists for moral agents to engage in a compromise. While he would agree with critics that removal of the veil of ignorance may be necessary to identify the injustices inherent in reality, he would argue that a moral agent now conscious both of these injustices and his ability to control them would be compelled to eliminate them by acting and deciding in ways that create a communally beneficial "middle ground." Ethical consenting members of a social contract, granted full knowledge of the circumstances of their situation, will choose not to perpetuate inequity and will deliberately replace conditions of extreme scarcity with those of moderate scarcity.

Finally, moderate scarcity enables people to compromise so that the basic needs of all individuals can be met simultaneously. Decisions that result in creation of this "middle ground" generally constitute the individual's most conservative alternative, because it ensures at bare minimum that his basic need for survival is met instead of potentially risking his absolute death. Under the Rawlsian veil of ignorance, players are most likely to choose the most personally beneficial and conservative option because they have no guidelines for decision-making other than their own self-interest. If all individuals are equally needy and equally ignorant under the veil, the self-interests of one should mirror those of any other person. If people behave according to these principles, the best interest of the least

advantaged member of society is protected because everyone acts conservatively in the event that he ends up being disadvantaged once the veil is removed and undeserved characteristics are reapplied; ultimately, this upholds the difference principle. If decisions made relative to these guidelines truly benefit one individual in society, it follows that they are beneficent for every other member of the society on at least a base level. Outcomes that result from these decisions fill the basic needs of every member of the society, validate the social contract, and ultimately support a common goal; all benefit, none are harmed, and the cooperation necessary to uphold principles of justice remains in tact. Therefore, John Rawls' original position is capable of serving as an effective model for guiding ethical decision-making in triage situations under conditions of moderate scarcity.

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