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Introduction

Writing at the interface between classical philosophy and contemporary nursing poses some interesting problems. Strictly speaking, scholars of Aristotelian philosophy have no basis for consideration of nursing except what Aristotle wrote about health and medicine. Contemporary medicine has little in common with ancient medicine except the end of health and the continuing respect of some physicians for the Hippocratic Oath. Twenty centuries ago when Aristotle recorded his insights, physicians practiced on the level of a craft, performing simple skilled procedures with the hope that an improved state of health would occur. E.D. Pellegrino and D.C. Thomasma (1980, Pellegrino,1998), argue that medicine is an ethical art in its professional practice. Professionals use techniques in an instrumental way but performing the techniques does not constitute the discipline of medicine. Excellent practice and virtue are required by the physician-patient relationship. Within this line of reasoning nursing is not a craft, although there are very technical aspects of nursing and some practitioners function on the level of craft. This broader image of nursing is reflected in its being characterized as an applied art (Johnson, 1996), an ethical practice (Blondeau, 2002), and a practical science (Whelton, 2000).

As practitioner and philosopher, one is faced with options. One option is a strict reading of Aristotle within which nursing does not fit or becomes a branch of ancient medicine and thus a technical art. This option makes Aristotle irrelevant because it does not capture the reality of contemporary nursing. Such an approach does not seem reasonable. Coming to philosophy
twenty years ago with twenty years of prior clinical nursing, I could place nursing practice within what Aristotle wrote. As an example, let me share something that makes me smile whenever I read it. Student nurses are drilled on the “five rights” of medication administration. I remember them as the (1) right medication to the (2) right person at the (3) right time in the (4) right amount in the (5) right way, the right mode of administration. Within his ethical writings, *Nicomachean Ethics*, Aristotle teaches that we are virtuous when we experience pleasure and pain “at the right time, toward the right objects, toward the right people, for the right reason, and in the right manner (1106b20-22).” Again, in nursing we are taught to practice within principles and make choices based on principles we have learned, and not just feelings or intuitions of a person’s need. These feelings are important and tell us things that sometimes cannot be put into words but for the most part we are to (1) know what we are doing, and to (2) choose to act for the benefit of the patient or family to move them toward the good end of health or a peaceful death, and we must (3) act consistently for the benefit of the patient and/or their family. These are also the characteristics of a virtuous act (1105a30-33). These readings suggest that at the level of practice, nursing is an ethical practice. Nursing is about scientific knowledge and skill, and about human interactions, but it is also about making decisions and acting for the good of others.

A practical or applied philosopher prefers to learn as much as possible from the ancient texts, in this case Aristotle’s *Nicomachean Ethics*, and then bring forward methods and ideas that will be helpful within contemporary practice. Within the scientific works it is easy to see that one cannot accept Aristotle’s cosmology with all that contemporary science has discovered. Does this mean that we ought to read Aristotle as a piece of literature, interesting but really “shelf material?” There is another option. One can read Aristotle in a way that acknowledges the historical context of the writing but looks for what is perennial bringing that forward to provide

What follows is an exposition and application to nursing of Aristotle’s treatment of the discipline of politics with its four-fold structure; speculative, practical, ethical, and legislative. The present discussion will use Aristotle’s treatment of politics, the single but multifaceted discipline, to show that nursing can also be considered a single multifaceted discipline. Nursing also includes science (speculative and practical), practice (art and ethics), and legislation. The speculative aspect of nursing has a parallel within politics as political science, the study of noble and true behaviors (Aristotle, 1094b15). The master politician, both as student of humans within the body politic and as community organizer parallels nurses who do research into practice and those who use research within patient care and community health.

Similar to proper individual actions within a community, proper nursing acts entail not only knowledge but also ethics. They are principle-based actions for the good of the other as distinctly different from oneself. These actions require insight into principles that apply in the particular situation (wisdom) and the courage to act on what is known. The legislative and administrative practitioners of nursing construct healthy communities and well-run health-care organizations. Thus, as with politics, in the ideal, nursing requires science, art, ethics and good policies forming a community within which excellent nursing practice can flourish.

Thus, the current paper compares Aristotle’s treatment of politics in the Nicomachean Ethics and the way the identified divisions of politics parallel the multifaceted nature of contemporary American nursing. We begin with Aristotle’s sketch of politics that frames it as political science, practice, and legislation. Politics, as described by Aristotle, acts both locally and centrally, either at the state or national level. Functioning for the good of society, politics is an ethical science and art completed by prudential judgements, also called the virtue of practical
wisdom. This requirement for virtue may explain why the discipline of politics is framed within Aristotle’s classical work on ethics.

**Politics, an overview**

Aristotle describes politics as the most sovereign and most comprehensive of disciplines (1094a27). Interestingly, translators differ on whether Aristotle intended to call politics, the master science (Ostwald, 1962) or master art (Ross, 1941). What is clear is that it exerts formative control within the state and is multifaceted. Aristotle writes, “since politics uses the rest of the sciences, and since, again, it legislates as to what we are to do and what we are to abstain from, the end of this science must include those of the others, so that this end must be the good for man [that is humans](1094b6-7)” (Ross, p.936). Notice that even though Ross had translated politics the master art (1094a28), a few lines later he translates Aristotle calling it a science. Beyond this point, and more importantly, this quotation is interesting because it supports that the discipline uses content from all of science in order to generate laws for the good of the whole community. In the same way, students of nursing appropriate significant content from related disciplines as principles, supporting nursing ends. Additionally, in this passage, politics is called a science in its legislative role. We will need to see in what way it is a science in a moment. But, concerning politics as legislative, Aristotle teaches that “Legislators make the citizens good by forming habits in them, and this is the wish of every legislator, and those who do not effect it [formation in virtue] miss their mark (1103b3-5)”(Ross, p.952). This passage implies that legislators are not just concerned with the community as a whole but with every individual within the community. One thinks of community health issues in which nurses lobby the government or strive for health of the community. However, as with the virtuous politician or legislator, nurses are not just concerned with the community as a whole but with every particular person within the community.
Politics as Science

Of science we read, “Scientific knowledge is judgement about things that are universal and necessary, and the conclusions of demonstration and all scientific knowledge, follow from first principles (for scientific knowledge involves apprehension of a rational ground) (1140b31-33”). What a high standard! These requirements that any scientific judgements have (1) a subject that is universal and necessary and (2) that the conclusions be demonstrable using rational foundations seem unattainable except by the most speculative inquiry into foundations of all existence. Surely, these requirements are not attainable by an inquiry into human behavior common to the practice disciplines. Aristotle had said he could only provide an outline, a sketch for ethical decision-making and that it was the mark of a wise person not to expect more certitude than the subject allowed (1094b12) and yet, he also says “Now fine and just actions, which political science investigates, admits of much variety and fluctuation of opinion…”(1094b15-16). Notice that this study of variable human action is the content of a science, political science. He will go on to argue that the stable foundation for political inquiry is a natural one found within universal aspects of being human (Whelton 2002).

Of variable contingent things Aristotle’s medieval commentator Thomas Aquinas (Litzinger, 1964) writes, “…contingent things can be understood in two ways: in one way according to their universal concepts (rationes), in the other way as they are in the concrete. Accordingly, the universal concepts of contingent things are immutable (unchanging). In this way demonstrations are given about contingent things, and the knowledge of them belongs to the demonstrative sciences (emphasis added)” (VI.L1:C1123).” Thus, Aquinas sees Aristotle teaching that grounding knowledge of changeable behaviors within universal concepts transitions the study of particulars to the study of universals. This transition is required for the study of
human behavior to be a science. An example of this is the transition from measuring behaviors to discovering the principles that apply to all humans and give rise to the behaviors.

Aquinas (Litzinger, 1964) also explains, “Therefore, where there is a question of knowledge alone, contingent things are passed over by the intellect which is perfected by the knowledge of the truth. But knowledge of the contingent is useful according as it gives direction to human operation which is concerned with what is contingent…Hence, also, only the practical sciences are concerned with contingent things precisely as they are contingent, v.g., in the area of the particular. Speculative sciences, on the other hand, do not deal with contingent things except according to universal reasons… (VI.L III: C 1152).” Thus while experience is of particulars, universal and necessary principles are grasped by the intellect and are then available for scientific demonstrations. The speculative sciences are concerned with these universals directly. But, practical sciences are concerned with these universal principles to the extent they explain and guide discernment and production of particulars, writing the just law, composing an ethical community, bringing health to an individual or community. However, completion of a practical science requires more than knowledge. It also requires (1) prudential judgment in the discernment of principles, (2) virtue in justly not holding one’s self or constituency as the only concern, and (3) the courage to act upon a reasoned decision.

The above discussion divided the sciences into speculative and practical. Speculative science is theoretical knowing for the sake of knowledge itself. Practical science is knowledge for making (productive arts) and for doing (practice). Both speculative and practical sciences require that inquiry lead to stable secure principles. Practical science requires that its content be completed by action. This selection of a proper action requires knowledge of the discipline, knowledge of the situation and the choice of the act as the proper action for the product or situation. This making and doing requires virtue. Without virtue, the individual is unable to
follow through on what is known. In some cases the individual is unable to even come to knowledge, as when a political agenda or personal desire drives what is studied.

Within this understanding, political science is a practical science. As practical, the knowledge is concerned with human practices. As science, the knowledge requires foundations in universal concepts, like what it is to be human and living in community. The transition from science to practice is made through good judgments in selecting the appropriate principles to apply within a situation, the decision to act, and the courage to act on the decision made. This transition from knowledge to action is the transformation from political science to the political arts, like moving a community to action.

**Politics as ethical practice**

One must address practice and ethics as a single aspect of politics. For Aristotle, the politician is actually a statesman governing with integrity. The practitioner acts with a goal for the state or community this goal is the good of the whole, a just society. With the desire to achieve this end, he or she inquires into what is required to bring about the desired objective. In this process of deliberation, the last discovered principle or step becomes in the order of practice or production, the first thing to be done. He writes about method, “They assume the end and consider how and by what means it is to be attained; and if it seems to be produced by several means they consider by which it is most easily and best produced, while if it is achieved by one only they consider how it will be achieved by this and by what means this will be achieved, till they come to the first cause, which in the order of discovery is last” (1112b16-20). This deliberation process uncovers the actions that need to be done but the choice of an action is an ethical decision. Aristotle writes that “choice cannot exist without reason and intellect or without a moral state; for good action and its opposite cannot exist without a combination of intellect and character. Intellect itself, however, moves nothing, but only the intellect which
aims at an end and is practical (1139a30-36).” Further acknowledging the role of emotion in moving one to act, he says that choice is either desiring reason or rational desire (1139b5). Either way, all choice requires awareness of the desired end, knowledge of ‘what is the case’ both regarding principles that apply and circumstances. In addition the virtuous choice requires the ability to deliberate well and a disposition to choose the good. In this way, the deliberate political or professional act is a moral act ideally making politics an ethical practice.

Aristotle does not separate politics and virtue. One can practice within the political arena without being virtuous, but for Aristotle as for his predecessor Plato in the first book of The Republic, one who practices within a discipline is one who actually fulfills the ends of that discipline. Plato uses the example of medicine. The one who is doctoring is actually in the practice of healing. If a physician harms, purposely or by a mistake, it is as human but not as doctor that it was done. Following this line of thought, one who is practicing the political arts is one who is actually working toward the common good, and might we add, the one who is practicing the nursing arts is one who is actually working toward the human good of health.

Thus, in addition to knowledge of political science, the student of politics requires the study of virtue (1102a 8-10). Virtue is an excellence of the inner being or character of the person, the soul. Virtues include wisdom, justice, courage and moderation. In the case of wisdom, it is knowing and being able to discern either what is the case (speculative wisdom) or what ought to be done (practical wisdom). Practical wisdom further divides into legislative and political. Political wisdom further divides into deliberative and judicial (1141b29-33). Legislative wisdom concerns control within the city, while political wisdom discerns particular situations. It is as if the legislators can clearly see universal principles required to bring the community to happiness, while the politically wise person sees applications for these principles within community development and judicial decisions. Aristotle writes,
Political wisdom and practical wisdom are the same state of mind, but their essence is not the same. Of the wisdom concerned with the city, the practical wisdom which plays a controlling part is legislative wisdom, while that which is related to this as particulars to their universal is known by the general name ‘political wisdom’; this has to do with action and deliberation, for a decree is a thing to be carried out in the form of an individual act. This is why the exponents of this art are alone said to ‘take part in politics’; for these alone ‘do things’ as manual labourers ‘do things’ (1141b23-28).

Notice that people with political wisdom do things. They make decrees that follow from the laws and they get things done. In fact, they effect change in the community just as the bricklayer effects change in building a house. This describes a very capable community organizer.

So, politics as an ethical practice is concerned with insight into the good end for the community, knowledge of principles including the law, clear deliberation, awareness of one’s emotional state, and an ability to interact with people in ways that get things done. The excellent politician is also careful to develop virtue and ethical decision-making skills.

**Politics as Legislative**

In his discussion of wisdom, Aristotle tells us that while both politicians and legislators have excellence in reasoning, the person with legislative wisdom has recognized the universal that can be a law to guide and control within a community while the person with political wisdom views particular circumstances as they would appear related to the laws provided by the legislators. Thus, politics is legislative when it focuses on finding universal principles and framing them into law. The role of legislation in society is found in the final book of the *Ethics*. Aristotle notes that individuals become angry when someone tells them what they ought to do, but amiably accept assistance in complying with the law. The law is a behavioral guide to bring the community to happiness. It represents minimum standards of virtue and supplements for a lack in family upbringing. The least one can do in striving for a virtuous life is to obey the law. In the first book of the *Ethics*, Aristotle had described the legislative as similar to the way an architect provides plans for a building so the workers will have a pattern to follow. The
legislator through the law lays plans for a well-ordered and just community of citizens. This work is concerned both with the community as a whole and with every individual citizen (1103b3-5).

**Disciplinary Parallels as Science**

For Aristotle, necessity and certitude are the marks of scientific knowledge. Professional decisions would surely benefit from foundations in secure scientific principles. These principles would guide practice and could be taught to students of the discipline. But desire and benefit do not make it so. How can nursing science be Aristotelian science? If scientific knowledge is a state or capacity to demonstrate (1139b31 fn 6, An. Post. 71a1), the objects of an Aristotelian science are ungenerated, imperishable, exist necessarily, and can be taught or learned. Within this perspective, science is a secure type of knowledge one could call necessary and unchanging. This requires a necessary and unchanging subject. Existing nature and certainly each human life is filled with change. This instability seems to contradict the possibility of scientific knowledge in the Aristotelian sense.

However, the stable subjects of science are not individual particulars. They are found in that which is shared by all individuals of the same kind. The nature or essence is made intelligible as the universal or concept grasped by the intellect. For an Aristotelian all humans share human nature. That means that any particular individual is a human being by virtue of its being one of the human kind and not other added attributes, like size or consciousness. It is these intelligible universals that transcend change and thus can be known and taught. They are the necessary and certain scientific subjects.

Additionally, discovery of principles and causes of behaviors allows for scientific demonstrations in nursing (Whelton, 2000). A consideration of particular behaviors themselves (effects) as the object of inquiry is to be concerned with perceptual attributes of the particular
effects. While important for practice, Aquinas would say for “counsel and operation (C 1123)”, this inquiry does not lead to stable universals. Inquiry into particulars is, however, important for counseling individuals or for adapting principles for practice. But, for science, the intellect must go beyond the particulars to the universals they express. Within this perspective, human nature is the natural kind behind behavior that provides the intelligible universal allowing for necessary demonstration characteristic of science. But, demonstrative science is only a core of stable knowledge. The bulk of practice content is not demonstrative. It is at the level of opinion, tradition, maxims of the wise, and personal experience. As with politics, since nursing science is on the level of knowledge, an intellectual capacity, in order to have actual patient care or legislation directed to patient care, the knowledge of practice has to give way to the prudent decision to act using knowledge of principles and knowledge of the particular situation.

For over twelve years, William A. Wallace taught the philosophy of science for nurses seeking masters degrees. In a chapter titled (1983) “Being scientific in a practice discipline” he wrote his ideas of nursing as a practical science that used knowledge from the more speculative sciences but required (1) research knowledge of practice (speculative and applied), (2) a core of scientific knowledge taught to students (this content would be from both more basic sciences and research into practice.), and (3) the art of clinical application. Within Wallace’s work, nursing science is this core of nursing knowledge that results from inquiry and research. It is fairly easy to see this scientific core in contemporary medicine but it is less evident in the science of nursing. So, the question lingers, is there a sufficient scientific base to call nursing a science? This has been answered affirmatively from the requirements of a practical science (Whelton, 2000). Although, in light of our current work with the discipline of politics, one would have to say that nursing as a multifaceted discipline includes nursing science, but nursing is not nursing science, just as politics is not political science but political science is politics. In this reading,
nursing is more than nursing science. It seems Aristotle would make more explicit the
divisions between nursing science, nursing practice and nursing legislation but these are all
nursing. Within inquiry and as a body of knowledge, one has science. When one is practicing
nursing, it is an art. Nursing is an art much in the sense that Aristotle said political practitioners
are laborers who bring things about (1141b28). They get things done.

Nurses are often concerned with making, or productive arts, and they use scientific
principles in the composition of products like a sterile dressing or a functioning intravenous line.
However, in practice, nursing is primarily concerned with doing and being rather than making.
The knowledge gained through experience and research is used in practice with the goal of
health (and might we add excellence of practice). This practical end (of active intervention) is
the hallmark of a practical science. The knowledge is stable and universal but it is used in
particular circumstances with all of their variety and uncertainty. This transition from
knowledge to practice requires good judgment. An action is concerned with a state of being. Its
excellence is in acting for the right reason, on the right person, at the right time, in the right way,
and to the right degree (1106b18-24). Practical sciences have speculative aspects but their goals
are not knowledge but knowledge for production and practice. It is clear from Aristotle in the
*Nicomachean Ethics* that productive science is completed by art, while practical science is
completed by behaviors directed toward the end or goal of the discipline.

For Aristotle the practical sciences seek to know with the necessity and certitude
characteristic of speculative science. Their end is to apply this knowledge within particular
circumstances for the fulfillment of practice goals. It is this end of practice that makes the
science practical, not the need for less accurate content. Wallace (1983) makes clear that
practical scientists need even more knowledge than the speculative scientist because the
practitioner seeks to generate a product or end and needs to know all of the steps to bring it into existence. He writes

An important consequence of this difference between theoretical and practical knowledge is that theoretical science seeks demonstrative knowledge of its subject, whereas practical science seeks actually to construct its subject, precisely as capable of being produced, and needs scientific knowledge to do so. This operational requirement demands of practical science an even more detailed knowledge of its subject matter than is required in theoretical science. It does not suffice in a practice discipline, for instance to know merely the cause of an effect; the perfection of the science requires a knowledge of all the movements and operations necessary to assure that such an effect will actually follow from that cause in the order of production. Practical science therefore presupposes theoretical knowledge...but it extends further than theoretical knowledge, all the way to knowledge of how the singular subject can be produced and actually perfected in the order of being (p. 275-6).

In addition to knowledge for composition of effective nursing intervention, nursing as a practical science requires virtue in the decision to act at a particular time and in a particular way for the good of the patient, making it also an ethical science within the pattern of political science. Every health care practitioner has a responsibility for ethical actions just as every citizen is responsible for ethical actions within the body politic. Thus we turn to the parallels in ethical practice.

**Disciplinary Parallels as Ethical Practice**

Of course, professional nursing as an academic discipline with community licensure for caring for the ill and dying was unknown in Aristotle’s day. However, as care between individuals, nursing is an ancient art that takes its roots from the abilities and needs of being human. The productive arts use scientific principles in the development of a product and the excellence of the art is within the excellent product. The practical activities of making a bed, changing dressings, giving medications and listening to a bereaved parent fall within productive aspects of this art. Ethical activities include caring interactions and decision-making prior to
practical interventions. Behind this art and ethic, nursing has a stable body of knowledge and active areas of research, nursing science.

Within the discipline of nursing there is research for understanding, explaining and improving practice. There are also political efforts to improve access to health care or the health care of a particular community. Nursing can be seen in the watchful administrative care of nurse managers and educators, but, there is something paradigmatic about the clinical setting of physicians, nurses and patients working together for the health of the patient as the good to be achieved for that particular individual (being with the dying would be included in this paradigmatic sense of nursing care). There is agreement with those who hold that ethics is the model of practice at this individual level. As with political practice, doing the correct thing requires knowledge of principles, full awareness of the situation within which one is working and the desire to act for the good of the patient, as well as a habit of acting that supports excellent practice (that is excellent care.). One has to ask, then, if direct patient care is nursing in some ultimate sense, are nursing research, political lobbying and legislation for health care, administration and education, nursing in only an analogical sense? According to Aristotle’s treatment of politics, they are not just analogically nursing. They are nursing as divisions of the same discipline promoting the same end as nurses who provide care for individuals and families within clinical practice. It is the end of health and the provision of caring activities toward this end that unites all of these facets of nursing into one discipline in the same way the end of the just community and activities towards this end unites the multifaceted discipline of politics.

As with politics, nursing actions ought to be ethical, proper human acts. Aristotle teaches that actions proper to humans are intellectual activities and life activities, like eating that conforms to reason, that is, they follow a rational principle. Thus, nursing is scientific in its inquiry into human health and illness, principle-based in legislation, and ethical in its practice.
At the level of practice, the ethical model makes sense because it is an ethical act when the nursing practitioner fulfills his or her role as caregiver by acting for the health of the patient in choosing to act for the good of the patient. But, as an ethical act, the action must be based on knowledge of principles and circumstances and chosen as the good that ought to be done for the patient as the desired good for the patient. Nursing activities are also similar to ethical actions because they occur between individuals in particular circumstances. In fact, it is this imbedded particularity that argues against nursing as a science. So, how can one affirm the particularity of nursing and then argue that it is a science, specifically a practical science? Some would argue that nursing is still a healing art as medicine was in Aristotle’s day, only now health-care has firmer scientific foundations. The answer lies in the distinction made above that politics is science in its inquiry and art in its practice. Within the discipline, nurse researchers focus primarily on scientific inquiry into health or practice. Their intellectual products and the analysis of nursing theorists build the body of knowledge for the discipline. There are, also, expert nurse practitioners whose primary focus is the art of integration and application of these principles within particular settings and clinical nurses who practice within the knowledge content of their level of education. Needless to say, nursing is a multifaceted discipline. It is arguably more diverse than politics.

Politics, ethics, medicine and nursing are all practice disciplines. They are active and directed towards an end, be that happiness, virtue, or health. Aristotle would say that health and virtue are for the sake of happiness thus subordinating health and virtue to happiness and subordinating their disciplines to political science, which he considered the master science (1094a27). If one were to choose only one title for nursing, practical science would seem best because it includes both inquiry and practice. It also emphasizes knowledge content, the universal aspects of nursing rather than the particulars.
This controlling, developmental (architectonic) capacity of political science may be the most difficult point in arguing that nursing follows the model of political science. But, it seems evident that there are nurses who implement knowledge of human nature, positive laws and health principles for the good of society as a whole. Additionally, there are nurses who work toward the development of just national health-care laws.

**Disciplinary Parallels as Legislative**

Within Aristotle’s treatment of politics, those gifted with the art of legislation use universal content to frame laws appropriate for both what it means to be a human and the particular circumstances of the political community (1094b6-7, 1103b3-6). Practitioners of politics adapt laws to situations to move the community toward happiness, “the highest of all goods achievable by action (1095a15).” This art of politics involves keeping one eye on the principles and the other on the particulars of daily life within the economic and social status of that particular community. This recalls nurses and other health practitioners adapting principles to fit the various technical and community settings within which they work.

Within the United States, the ethical ideal of nursing care for the health of individuals and communities is challenged. This is partially because of insurance control and acceptance of the business model for health care rather than a model of care emerging from within the natural lawfulness of human need and nursing practice. To be a professional nurse used to be a status granted to nurses in service to society. With multiple levels of institutional care givers this distinction is fading. Additionally, there is an increased focus on the self and what one deserves to have versus what one can give.

Contemporary health care is further dividing those who can afford care and those who cannot. In the future this gap will likely grow even larger. Health related inquiry is exploring interventions that could be only accessible to the very wealthy, like genetic therapy. At the same
time, billions of people in the world suffer from hunger. There is something very unjust about this. The financially powerful will gain comfort and freedom from medication while the weaker members of society suffer from a lack of the minimum needs for food and shelter. This is one area where health legislation must enter as a nursing practice. If there is a common bond between humans, then there is a responsibility to legislate in ways that enhance the life and health of all humanity.

At this time in human history, there is a clash between freedom demanded by speculative scientists for unobstructed inquiry into the inner secrets of the origin of life and religious perspectives on this origin. Scientists are understandably fascinated by the minute changes that trigger genome activation and subsequent differentiation into the myriad types of cells that compose a mature human. Applied scientists are eagerly seeking applications for every new discovery. Health practitioners are preparing for a new paradigm in health care that would not treat illnesses like diabetes but cure them through transplantation of especially grown tissues. There would be highly specialized cellular biologists serving as health technicians who do nuclear transplantation cloning from an individual’s own stem cells into ova, stimulating them to grow needed body tissues. Practical scientists would take this information and capacity to patients. Surely, nurses will have a role within this work. These nurses need to be able to make decisions based on principles of science, an in-depth understanding of human life, the needs of the particular individual and what is best for that individual, and what is best for the community. This later is the difficulty. Which community counts? Ought the focus to be on the community of those financially able to access genetic health care, or the community of one’s city, state or country? Ethicists will vary in their answers depending on their philosophical commitments.

There are two important ethical issues in contemporary and emergent health care practices, not necessarily in this sequence of priority. There is a call to justice for all
human kind and concern for the role humans have taken in the generation of human life. As stated earlier, it does not seem just that some receive advanced expensive therapy that increases ones quality of life while others are struggling just to survive with a minimum of food and shelter. The second issue of concern, the role of humans in the generation of human life, reflects Aristotle’s teaching that humans have a divine capacity in immaterial thought that could only be provided by a divine source. He would not accept that the materials of the human chromosomes could alone generate the immaterial capacities of reason and will. He would accept the energizing capacities of nature as sufficient in the generation of plant and animal life, but there is something distinctly different about the human capacity to transcend the self in contemplation of the universe. Because of the immaterial capacities of the intellect, Aristotle requires a divine participation in the generation of human life (Generation of Animals, 736b, and Nicomachean Ethics Bk. X, chapters. 7 and 8). He does not tell us how to respond to that divine participation or how to value all humans. This determination is the role of those who inquire into theological matters. It is interesting, though, that within the Politics, Aristotle argued that abortion for population control ought to be illegal once life could be detected. For the ancient world this was at quickening, about four months (1335b). Today, it can be argued that an individual human life begins at 52 hours when an internal principle of self development is detectable (Whelton, 2002a)

The above appeal to legislation in the Politics bring us again to the role of health legislation and back to the role of those capable of making laws, the legislators. The legislative aspects of health care require the scientific as much as the political legislator because ideally these practitioners are lobbying for or making scientifically grounded laws to guide individuals to healthy life choices. We saw earlier that Aristotle argues that
these individuals need a good background in human nature and the principles related to the
laws being formed. They also need virtue, that is, habits of excellence. It is an
interesting question if this excellence needs to pervade the whole life or just legislative
and practice activities. However, since it is virtue that allows the individual to see a
particular situation as a case for the implementation of ethical principles, it would seem
that legislators and practitioners need to be fundamentally moral.

Notice that both the nursing legislative and clinical practitioners require the scientific and
the philosophical or ethical perspectives on human life if they are to guide people to healthy life
choices. To this content on human life, each nurse adds content specific to their area of practice.
This implementation of principles within particular circumstances is the art of practice. The role
of legislation is to see the universal that needs to be implemented as law. The nursing
practitioner focuses on application of the law for an individual or communities of individuals.

**Unity of the Disciplines**

From the above analysis, it seems fairly obvious that one can make parallels between
politics and nursing as practice disciplines. Thus, if politics is one multifaceted discipline, then
so is nursing. So, what provides unity within the political discipline? Within Aristotle’s
discussion, unity is provided by the end for which everything is done. Political inquiry is for the
sake of the common good, bringing the community to justice so citizens can be happy. Universal
principles are determined and legislated for this end in a just political system that facilitates
human happiness. Political practitioners implement laws in specific situations for the good of
the community, making place for a peaceful existence conducive to human happiness. The role
of the end or goal of the discipline of nursing serves the same unifying role. If the end for
nursing unifies the discipline, what is this end? Concluding this analysis, it seems clear that this
end is health of individuals and communities. However, since health is also the end of other
disciplines, one has to ask where the uniqueness of nursing lies. Is it within the caring activities, or the perspective and educational background of its practitioners? Do nursing duties or the personal presence of the nurse define nursing interactions? Is the uniqueness of nursing found within interactions between practitioners and patients or families in providing care with the end of health in mind? Can one say, nursing is unique in who its practitioners are in the promotion of this end of health?

Unfortunately, Aristotle offers no answer to these familiar questions. However, some time ago, while I was teaching an introductory philosophy course, which included Aristotle’s *Nicomachean Ethics*, the discipline of nursing came to mind. While reading references to political science, the discipline that studies fine and just actions (1094b15), I recalled nursing studies into effective nursing interventions. These research results are part of an intellectual core that is nursing science. Thinking of fine and just actions also reflects that the paradigm nursing act, definitive of the discipline, is a moral act. Aristotle taught that the just and self controlled person was not the one who acted in these ways but the one who performed the just and self controlled acts in “the way just and self-controlled men do (1105b7-9).” This clarifies that the nurse is not the one who does nursing actions, but the one who performs these actions in the way a nurse would. This would lead one to think the uniqueness of nursing is within the individual and not within particular activities or duties.

Another clarifying distinction that Aristotle makes is that between justice and just acts. This is the relation between the universal and the particular. Aristotle writes, “For there are many specific acts, but only one thing in each case that is just, viz., the universal (1135a8)”. Thus, a distinction is made between nursing and nursing acts. There are a wide range of nursing acts that are performed as nursing. They share in the universal meaning of nursing as particular expressions of the universal, the unique discipline that is nursing. Not everyone who acts as a
nurse is a nurse, but there are a variety of behaviors that when done in a certain way, with a
certain ethic or ethos brings about nursing by being a particular instance of the universal
expressed in the term ‘nursing’.

REFERENCE NOTES

1 An earlier version of this paper appeared in Nursing Philosophy (3:3) November 2002. Used
with permission. ((permission in process))
2 Following Ostwald (1962), we take politics is the broader sense of “Politike” “the science of
the city-state, the polis, and its members, not merely in our narrow ‘political’ sense of the word
but also in the sense that a civilized human existence is, according to Plato and Aristotle, only
possible in the polis. Thus politike involves not only the science of the state, ‘politics,’ but of
our concept of ‘society’ as well (p.4, n8).”
3 This exposition focuses on the Aristotelian account, as this is the intended contribution, rather
than a survey of the nursing literature on disciplinary themes. No slight is intended. For an
extensive bibliography of relevant nursing literature the reader is referred to the recent article by
Danielle Blondeau, “Nursing Art as a Practical Art: The Necessary Relationship Between
Nursing art and Nursing Ethics, Nursing Philosophy 2002,
4 This work uses the Ostwald translation unless otherwise noted.
5 This recalls Blondeau’s (2002) position that nursing is an ethical practice.

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