

Moral Licensing

By Norman M. Goldfarb

Extensive behavioral research has demonstrated the existence of a psychological phenomenon called "moral licensing" (or "moral self-licensing"). Moral licensing occurs when a person's good deeds empower that person to then engage in immoral or morally ambiguous deeds. Moral licensing appears to work in two ways:

- In the "moral credentials" mechanism, a person's good deeds establish the person's credentials as a good person so that he or she views subsequent questionable acts as morally acceptable because the person believes that he or she is a moral person who would not engage in immoral acts.
- In the "moral credits" mechanism, a person's good deeds put moral dollars in a moral bank that can be withdrawn later to pay for immoral acts, provided the moral bank account retains a positive balance.

Moral licensing works across moral domains. In other words, a good deed in one area gives moral license in another. For example, giving 50 cents to a homeless person gives moral license to then cut into a line at the bus stop. With the moral credentials mechanism, cutting into the line is not really immoral; everybody does it and what's the harm? With the moral credits mechanism, cutting into the line is acceptable because the person is just recovering his or her rightful place in the line that was lost while making the charitable donation. Moral licensing is problematic when a conflicting interest triggers use of the license. In this example, the conflicting interest of getting home on time outweighs the interest of behaving in a socially acceptable manner that avoids opprobrium.

Moral licensing does not require actual moral acts. Experimental subjects who are invited to write about themselves as moral persons are more likely to then make morally dubious decisions. Merely expressing moral intentions, imagining moral behavior, or expressing a positive moral judgment gives moral license. For example, experimental subjects who say that race should not matter in an employment situation are then more likely to be influenced by race when they actually choose who to hire. However, people prefer to be morally consistent, i.e., not hypocritical, so will rationalize morally ambiguous decisions. Less rationalization is required across moral domains because the moral worth of the deeds is hard to compare. Rationalization is also more difficult for people who believe they *are* moral, as opposed to people who believe they *should act in a moral way*.

Moral licensing also operates at the group level. A group can make dubious decisions because the group as a whole gives itself moral license to do so. In addition, a member of the group can act immorally based on the group's moral license.

Application to Clinical Research

Healthcare professionals who have committed their lives to fighting death and disease may think of themselves as inherently moral, which gives them moral license to make dubious decisions.

In an extreme example, Nazi doctors gave themselves moral license to conduct horrific medical research on concentration camp inmates. From their perspective, they were serving two powerful moral causes: medical science and the war effort. Plus, they had to endure the suffering of their study subjects, to say nothing of the unpleasant working conditions. They no doubt thought of themselves as moral people making the best of a difficult situation.

Since World War II, 60 years of evolution in clinical research ethics makes the Nazi doctors' conduct unimaginable and much smaller ethical lapses abhorrent. However, clinical research remains fraught with countless moral judgments, for example:

- Should we conduct a clinical trial that has marginal scientific merit?
- Should we enroll subjects from a community that may not benefit from the study results?
- Can we really say that a study is in equipoise based on minimal knowledge of the test article?
- How much risk is acceptable in a study?
- Should we enroll a subject who might be better off in a different study at a different institution?
- Should we enroll a subject who is willing to give consent but is not interested in understanding the study?
- Should we discuss our financial, career and other conflicting interests with potential study subjects?
- How vigorously should we persuade a subject to stay in a study?

Many such questions have no obvious right answers, so moral judgments are required. These judgments are more likely to be ethical when moral licensing is not in effect. There are several ways to minimize the effects of moral licensing:

- Evaluate people for their susceptibility to moral licensing (although a suitable assessment instrument may not be available).
- Educate people on its existence, how it can distort judgment, and how to avoid its effects.
- Instill a sense in people that they *are moral* and not just that they *should act in a moral way*, reducing the temptation for rationalization.
- Watch for situations in which moral licensing can occur and raise the issue for explicit discussion.

A Google search on "moral licensing" + "clinical research" yields 170 results, compared to 5,680 for "moral licensing" alone, so there is much opportunity for behavioral research to explore problem areas, develop assessment tools, and create training programs.

References

"Do Good Deeds Make Bad People?" Sophie Clot, Gilles Grolleau, and Lisette Ibanez, INRA-IDEI Seminar, December 2011. http://idei.fr/doc/conf/inra/papers_2011/ibanez_slides.pdf

"Group Moral Licensing" Robin Hanson, July 23, 2011.

<http://www.overcomingbias.com/2011/07/moral-licensing-of-groups.html>

"Moral Self-Licensing: When Being Good Frees Us to Be Bad" Anna C. Merritt, *Social and Personality Psychology Compass* 4/5 (2010): 344–357.

<http://wat1224.ucr.edu/Morality/Morin%202010%20Compass%20on%20Moral%20Licensing.pdf>

Author

Norman M. Goldfarb is Managing Director of First Clinical Research LLC, a provider of clinical research best practices information services. Contact him at 1.650.465.0119 or ngoldfarb@firstclinical.com.