

Johns Hopkins University Press Podcast

Brian Earp, *Philosophy, Psychiatry, and Psychology*

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Mary Alice Yeskey

Welcome to the Johns Hopkins University Press podcast. I'm Mary Alice Yeskey with the Hopkins Press Journals Division. Joining us today is Dr. Brian Earp. Dr. Earp is the associate director of the Yale Hastings program in ethics and health policy at Yale University and is a research fellow at the Uehiro Center for Practical Ethics at the University of Oxford. He is the co-author of *Love Drugs: The Chemical Future of Relationships* from Stanford University Press and writes the quarterly "Philosophy in the Real World" column for *The Philosopher*. He has published extensively on moral psychology, experimental philosophy, and bioethics, including a 2017 paper titled "Addicted to Love: What is Love Addiction and When Should It Be Treated?" which appeared in the journal *Philosophy, Psychiatry, and Psychology*.

Thank you so much for joining us today, Brian. I really appreciate your time today.

Brian Earp

It's my pleasure.

Mary Alice Yeskey

The first question I like to ask all our guests is can you tell us what is your academic origin story?

Brian Earp

Oh, I have a pretty convoluted academic origin story, so I'll try to be concise. When I was an undergraduate, I studied philosophy and cognitive science primarily, and even that was a bit of a trek to get there because I started out as an English major. I didn't know anything about philosophy or cognitive science. I knew I liked reading books and I liked thinking about big questions that come up in literature and so forth, but I ended up studying both a scientific area and philosophy. Then I went on and studied experimental psychology in England for master's degree but I was still doing some philosophy while I was there, my course projects ended up being a little bit more philosophical in nature. Then I went and was kind of learning a little bit about bioethics and formally I went back and did another degree that was in history, philosophy, science, medicine, and technology, and then I went back and did some bioethics while I was also doing a theater career at the time, and then I finally decided to apply for a Pd.D. which is in philosophy and psychology. So, I've been all over the place doing a bunch of different things and it's not clear how they all unite into some beautiful strand of coherent work but that's more or less my academic background in a nutshell.

Mary Alice Yeskey

I think everybody has a convoluted academic origin story, so you're in good company. Your paper explores two main schools of thought regarding love as an addiction, the narrow view which says that only really harmful forms of love are addictive because by definition an addiction is harmful, and the broader view that all love is potentially or perhaps even mildly addictive as it's a spectrum or kind of a continuum of an appetite and that appetite can sometimes become overstimulated. My question is do you think there's also a consideration to be made for personal interpretation of when something's addictive or harmful? What one person might call an obsession, another person might call lovesickness or puppy love. Who do you think is the ultimate authority on whether a relationship is harmful?

[Brian Earp](#)

That's a really good question because it plays up the jockeying for power that happens in many discourses where certain people want to claim primacy over the ability to define terms or say how we should refer to certain things. So, you know, the medical, psychiatric, clinical, diagnostic group of people want to be able to say, we get to decide what counts as an addiction, whether it's an addiction having to do with romantic, you know, relationships or whether it's gambling addiction or something else, so even within that field there's a controversy. You know, some people think that to speak of love addiction is just inappropriate, that we shouldn't count this as a diagnostic category that would be treated as standard within medicine, for example. They would say, for example, if something is really harmful and obsessive and you are drawn towards certain kinds of relationships despite them being toxic and harmful, we shouldn't refer to that as love. There's also a feminist philosophy argument that goes along these lines. They say love is a positive thing, so if we allow toxic or abusive relationships or something where somebody's welfare is clearly being impaired by the connection, to sort of adorn it with the label love is dangerous and something we shouldn't do.

So, there's debates within medicine, there's debates within philosophy, and then what I take your point to be, is, well, what about the person who's in the relationship, shouldn't they have some sort of say over how to conceptualize their own experience? And I think that's really important, I think that there's a tendency to defer to experts in some sense sometimes to the exclusion of the person's own interpretation of their life and their relationship. So, there can be a sort of paternalism here, where some individuals say, I hereby deem your relationship to be one that exhibits addictive behaviors, and you might be thinking to yourself, well, sure, maybe I'm obsessed with this person in some sense, but I value that, you know, I enjoy the intensity and the spark of this and so forth. So, there's no universal line that can be drawn in the sand where we're all going to get on board with the analysis, I think for people who are in relationships that many of us deem to be harmful or toxic or bad for them in some way it certainly makes sense that we would want to try to persuade the person to this perspective and try to bring them information and show them why it is that they might be, you know, tolerating harms more than they should be, but I do think there's a risk of sort of overriding someone's own interpretive framework and realizing that there's a lot of complex meanings we assign to

different interpersonal and romantic experiences and not all of those can necessarily be captured by these medical diagnostic criteria even if that was a matter of agreement among experts.

Mary Alice Yeskey

Your research also touches on the ethical implications of anti-love biotechnology, which is also covered in your book, *Love Drugs*. What would, or do, if they're already happening, these technologies look like? How do they work?

Brian Earp

Right, there's a couple of different ways that you can intervene in a person's brain level chemistry to try to affect their relationship in a way that would dull or detract from their sense of attachment with someone. So, one is just a side effect of a commonly prescribed drug which falls under that class of SSRIs, which stands for selective serotonin reuptake inhibitors, and these drugs are very commonly prescribed for depression, anxiety, and some other things, and many people are now aware that SSRI's can have side effects that are relevant to relationships, one of which is that it can depress libido or kind of weaken a person's sex drive, and if you're in a sexual relationship with someone and you value being able to interact with them in that way this can be detrimental to some kinds of relationships. But there's also a side effect that some people report that it isn't just this physiological dampening of their interest in sex that happens, but they have what they describe as a sort of higher-level blunting of their emotional life. So, it's not just maybe that their own sadness is depressed, which perhaps is the point of the drug, but they find they can't really care about their feelings for their partner either. There's this general blandness that overtakes their life, and so what this suggests is that you know, if you want to be intimate with someone, if you want to pursue a relationship with them, and you want to be emotionally connected with them, then this would be a really unfortunate side effect and this is bad for some relationships.

But if you're finding yourself irresistibly drawn towards someone whom you consider to be reflectively a bad relationship partner. You're finding yourself constantly seeking someone who when you step back and think about it, you know, I really shouldn't be with this person, this person is harmful to me, this person abuses me and disrespects me, or whatever, then it's possible that this "side effect" of the drug could be an intended effect, where you would want to have this sort of blunting toward the other person, at least long enough to get out of the relationship and then maybe get off the drug and, you know, set up your life elsewhere because of course, this is a global effect, it isn't just your intimate partner whose feeling you would not be as motivated to respond to, it might be everybody in your life if you're one of the people who has this kind of side effect in your case.

So, that's just a commonly used drug that is already available, that's widely prescribed that can have these indirect effects for relationships. And this just ties up with a broader point that western medicine focuses on the individual level symptoms of a target of treatment and so if

you run a clinical trial to see what the effects are of an SSRI on depression, you're just going to have a questionnaire saying, what are your symptoms of depression?, but if you had also included a questionnaire that said, well, tell me about your relationship, have you noticed any changes in your emotional life with your partner?, then you would be able to systematically understand the effects of these drugs on these other variables, but the key point is just because you don't measure something doesn't mean it isn't happening, and partly in the book we called for a relational turn in psychopharmacology in general where it's not enough to be looking at the individual levels symptoms of what's going on, we should always be considering if we're going to give a drug to somebody that has a pretty powerful effect on their brain chemistry, we need to understand not just what are the intended effects or what are the low-level biophysiological effects, but what are the side effects at a bigger level, side effects to our relationships, side effects on how we're situated in our social network and so forth.

So, that's one example. Then you might think, what happens when you get out of a relationship, you've succeeded in leaving someone or perhaps that person has left you? You have a partner of twenty years and they've just abandoned you and you're in complete despair, or you're going through a breakup of some kind. Well, is there a way then to help you, as it were, get over the relationship? And, you know, there are all the usual ways of doing this, you can, you know, stop following the person on Facebook and try to delete their number from your phone, don't hang out in the places where you regularly see each other and so forth. There's all sorts of non-biochemically mediated ways of trying to get over someone. But suppose that this betrayal that happened, you know, the breakup that happened, is one from which you're really struggling to recover, and every time you reflect on what happened it just causes this meltdown, and this is going on for weeks and months on end. It seems like, well, maybe this would be a situation where it could be appropriate or prudent to pursue some further means of trying to overcome the problem. And so, there's an interesting therapy that's now being tried primarily in Canada which is called reconsolidation therapy, and this is a way of basically stripping the emotional content of certain kinds of traumatic memories but not deleting the memories in a sort of *Eternal Sunshine of the Spotless Mind* type of way.

Mary Alice Yeskey

Right.

Brian Earp

So, and you wouldn't necessarily want to do that. Suppose you've had a traumatic experience, you've gone through a breakup, you've had this really difficult thing. It's not that you necessarily want to forget that it happened, because then this interrupts the narrative continuity of your life, I mean that would start to be a real worry if somebody said, didn't you have a breakup with someone?, and you go, yeah, I actually can't remember that; did that happen? Now that seems like a problem. So, we want to be able to remember what happened to us, but we want to be able sometimes to dampen the emotional effects of those memories if

they're preventing us from healing and moving on with our lives and forming healthier relationships going forward. So, the way this therapy works is you go into the clinic, you call up whatever is the traumatic memory, the memory of the breakup or the romantic betrayal or whatever it was, but while you're doing it, you're taking a drug called Propanol, which is a beta-blocker, it basically just settles down some of your automatic emotional responses to the stimuli. So, this is used by, for example, some professional musicians who are trying to calm their nerves during performances.

Mary Alice Yeskey

Oh, right, okay.

Brian Earp

They might take a beta blocker to settle down their autonomic nervous system. And so, what happens is that you recall the memory, but you have a drug that's suppressing your emotional response to the memory. And so, you're able to experience in real time what it's like to have the memory without the emotional response, and then you can re-record it after the session, and then the idea is that after several such iterations of this you should be able to, when you're not taking the drug, to reflect on the memory without then having, you sort of learned how to have the memory without having this response. So, this is a way where there's some chemical that can be used in conjunction with a therapeutic context to help some people overcome a relationship when it rises to the level of trauma that's comparable to post-traumatic stress disorder, and that was the context in which this therapy was originally.

Mary Alice Yeskey

Yeah, I was gonna ask, was this originally invented, not invented, but yeah, that was my question, what was the original purpose of this kind of therapy? That's really interesting, and has this been successful?

Brian Earp

Well, so far, I mean, the research that's available for the classic cases of post-traumatic stress disorder seems to be promising in terms of the treatment effects. The evidence for how this helps people who have trauma related to relationships that maybe don't rise to clinical diagnosis of PTSD, I've just seen indirect reports of the evidence there, sort of reports coming out of the lab that haven't yet been published through peer-review and so forth, so I'd like to see more evidence of how this works in the case of relationships, but there's some preliminary accounts from this lab, where this work has been done, that it seems to be effective at least with some people.

Mary Alice Yeskey

That's so interesting, and I really like your use of the word rerecording, because it's like you're just sort of editing the reaction to the memory not the memory itself, it's almost like taking

something from stereo to mono or something, I'm sure there's a better extended metaphor there.

Brian Earp

That's a nice way of saying it.

Mary Alice Yeskey

I was struck by the portion of your research that detailed the differences between love and addiction, in particular how love is sort of universal. How while not everyone on Earth would know what it's like to crave alcohol to the point of discomfort or, you know, really interrupting their life, romantic love is a universal phenomenon which you note in your paper and that pretty much everyone knows what that crushing obsession feeling is and what that's like. How do you think that impacts the value judgment based on love when it goes awry or becomes unhealthy, the fact that everyone kind of knows what that initial feeling feels like?

Brian Earp

I think maybe in retrospect I would want to edit my presumption of universality that we included in that paper in a couple of ways. First is that, you know, there's an underlying biological dimension of love that comes from the fact that we evolved as creatures who have to mate with each other in order to reproduce and certain kinds of bonds, like the parental bond, is important for us to form if we're going to have offspring, so there's a sort of bio-evolutionary story that you can tell about why certain brain level properties exist that support and undergird our experience of love. But then I think it's important to say that the phenomenological experience of love as inflected through one's cultural context is not necessarily the same everywhere you go. So, you know, the way that we think about love, for example, the concepts we use, which types of experience we even want to label as an instance of love can be subject to cultural and historical contingencies.

So, an example that we talk about in the book, which I borrow from Carrie Jenkins, a philosopher of love in Canada I believe, she brings up the example of a lesbian couple in the late 1700s in England, and she says, now, according to the likes of the society at the time, they may be having all the sorts of biological, physiological responses, you know, they find it hard to breathe when they see the other person, and they're excited, and their hands get clammy when they, you know, hold hands because they're just so in love with each other. They might be having all these kinds of things going on, but the society might not recognize their relationship as it were a valid instance of love, it might be dismissed as something else. And this can have very real consequences of course for their experience because it means that as they're walking down the street, they might not be able to manifest their feelings for one another. They might not be able to hold hands, they might be able to, you know, have children together or whatever it might be. And so, when you realize that way a society gives you a narrative or a set of concepts about love can trickle down and have pretty big implications for

your actual experience of, you know, relating emotionally and romantically to another person, you start to realize that it isn't the same for everyone. Even within a society, as this example shows, much less across societies and so forth. So, I just draw that distinction that there's individual distinctions in how love is experienced, some people report that they don't know if they've experienced love, some people will say, you know, I read these poems and I watch these films and I have this evidence I get that some people seem to be having this ecstatic kind of response to another human being and they just are beside themselves and so forth, and perhaps they've never experienced that, or I'm not sure if I've experienced that.

So, certainly, I think it's that case that it's normalized within society to have an obsessive all-consuming desire and passion for someone that is dissimilar to how we feel about someone that we feel has an all-consuming desire for alcohol or for drugs or for gambling. The latter sort of thing is more or less universally condemned while the former sort of thing, at least within contemporary western society, is more or less universally celebrated. But even that wasn't always true. You know, if you think of the story of Romeo and Juliet, obviously, you know, we contemporary readers are very excited about their star-crossed passionate love, but the families were not at all approving of their connection because it was seen as a threat to the social order, and so maybe for most of "western history" love was seen as a illness. At least the kind of passionate, romantic release stage love that we're talking about, when you have a crush on someone. That was seen as something quite dangerous because marriages anyway were meant to be based on social and economic factors. You know, which families needed to form an alliance, or did you have to have children to run the farm or something like that. But the idea that you would build a lifelong commitment to someone on the back of something so fleeting and unstable as romantic love as we now conceive of it was seen as an absurdity.

Mary Alice Yeskey

I'm thinking about *Fiddler on the Roof* right now because of what you just said in terms of-

Brian Earp

Oh, fascinating, yes, yes.

Mary Alice Yeskey

You know, the way that that song of "Do You Love Me?" and how they were an arranged marriage and it just sort of, like, is this? And how sweet the end of the song is.

Brian Earp

Yes, exactly. So, I wrote a paper with some colleagues recently on the concept of true love as that gets evoked in just ordinary discourse and we tried to figure out, well, what really do people mean when they say that, or what feature of a relationship are they trying to pick out, either explicitly or implicitly? And, you know, one view is that true love might just be the most highly prototypical love that has all the features of love that we tend to think about including

intimacy, passion, and commitment, and then when we were reflecting on this we came up with the example of *Fiddler on the Roof*, where-

Mary Alice Yeskey

Oh, really.

Brian Earp

They don't have a passionate relationship, it's not that they're gazing into each other's eyes lovingly or whatever. They basically just have a marriage where they are there for each other and they, you know, do various tasks around the house or whatever and they've come to form a certain intimacy through a shared experience, but they don't have a prototypical loving relationship if what that requires is full-fledged passion, full-fledged intimacy, full-fledged commitment. You know, they have a very committed relationship, they have a certain kind of intimacy but it's not through direct emotional disclosure or whatever, but what I take the point of that song to be is that yes, they clearly love each other even though they don't fit the kind of passionate love their observing in their daughters, let's say.

Mary Alice Yeskey

Right, and the trajectory was completely different, yeah.

Brian Earp

Exactly, so I think that's a great point, that, you know, there are things that are properly so-called love even though they don't necessarily have all the criteria that we tend to think of as being prototypically associated with romantic love.

Mary Alice Yeskey

Yeah, and also the chronology of it, you know, in the sense that when you say true love in my head, I'm imagining that electric lightning pow when it has to happen to both people simultaneously or else it's not true love, you know, and its *Fiddler* and just other relationships where two people can meet, not think much of each other, meet again ten years later and it happens. It's like, I don't know, the value placed on that instantaneous, simultaneous connection is so much higher in our society when it could be twenty years down the road, it just takes some time.

Brian Earp

Yeah, and to dwell for a moment on the idea of an arranged marriage, I mean many people have a view when they think of an arranged marriage as, like, a forced marriage between people who, you know, the community requires that they get together but there's many different ways.

Mary Alice Yeskey

Unwilling, yeah.

Brian Earp

Yeah, but there's many different traditions of arranged marriages. Some of which, you know, the partners have a veto at least and the families are in good faith trying to find people they think will be compatible for each other. And so, what typically happens, or at least what often happens in these situations, is that the partners are getting together, they're forming a relationship, a sensibly romantic relationship, not because they fell in love with each other but because they were set up by their families, and then they have the interesting process of whether they can create a sense of love and intimacy within the relationship as it were from scratch. And in these cases it might be that it's something that slowly evolves and emerges out of the daily interactions that they have and the kinds of behaviors they engage in rather than something that's like being struck by lightning, and, you know, if you step back and analyze these different ways a relationship can develop it's not clear that that's any worse, or less worthy of celebration, if a couple, you know, exercises their agency to try to develop a sense of intimacy even if they never have that kind of passionate ecstatic romantic feeling for one another.

Mary Alice Yeskey

There was a really good *New Yorker* article about sort of bringing back or expanding the definition and being able to say that I love my friends very dearly and that is just as valuable.

Brian Earp

This came out yesterday on NPR, I think it was. Yeah, it was called something like "Friends with Benefits".

Mary Alice Yeskey

But, yeah, it's just, like, I need that just as much as I need my partner, and that the weight of those is just so messed up in our society, especially these days, when your support systems are just absolutely required.

Brian Earp

Yeah, I mean, basically, a point that comes out of this is we tend to have these social scripts that we inherit from being socialized within a given culture where we have ideas as to what appropriate relationships should be and they tend to fall into certain categories. So, we think, well, there's the romantic partner relationship, there's the lover relationship, there's the friend relationship, there's the parent-child relationship. We sort of get handed these by our culture as ways in which we should conceive of our interactions with other people over time, and as a consequence of that we actually aren't attentive to possibilities that might unfold between us and another person because we're trying to measure our interactions against what we think the prescribed relationship norm is. And so, there are some people who say what if we were to

relax our vision a little bit here and blur around the edges and say, why couldn't it be that you could have a friend, with whom you also had some intimate experiences without that thereby detracting from or destabilizing the friendship. Or, you know, why couldn't it be the case that you could have what you consider to be a romantic relationship with someone, you've lived together for many years, but maybe you don't have a sexual interaction with one another, maybe that's great. Or maybe you have sexual interactions with other people, but you still consider yourselves to be in a romantic relationship. It's just, you know, giving us the ability to be a little bit more creative about how we conceive of how we're relating to other people, and then that's going to affect how we do in fact relate to other people.

Mary Alice Yeskey

Agreed, and I read something about how, particularly with the onset of covid, there were people who were, you know, getting divorced, breaking up, but still co-habituating and creating this entirely new thing which is, you know, we're not really roommates, you know, we have a history, we still care deeply about each other, it just, the redefining of it is something that I find really fascinating and like you said at the beginning, just the buckets that we've been taught to put things in reminds me very much of the gender binary, it's like you're just either one or the other and all of our language reflects that, there is no, you know, you're not my friend, you're not my wife, I don't know what to call you, there's just, the language is tricky, because we don't have any word for that in-between or something new that you've created yourself. I think there's a lot of space for that.

Brian Earp

Right, and it often constrains our imagination. The ways we can even contemplate being with one another are oftentimes shaped and confined by our language. I don't know how to refer to something, it's a little hard to explain to others what we're doing. I mean, this is a good example, suppose you have a relationship that you're developing with someone that isn't clearly, I don't know, a boyfriend/girlfriend relationship, or let's say a boyfriend/boyfriend relationship, or whatever, but it has some of those features, and then somebody comes along and says, oh, so what's your relationship like with so-and-so? Well, if you don't have a word for what you're doing, you have to sort of, you know, avoid the question or launch into a 12-minute speech about how it's complicated and so forth, but imagine if we had a word for such things and we could just say, well, we're like this, and then the other person would go, oh, okay, I know basically what that is. And so, I think it's true that, you know, the conceptual resources that are made available to use through our language can really affect the social costs, of trying to do something new because it's hard to explain to other people what you're doing unless they share your presuppositions from the language.

Mary Alice Yeskey

Exactly, and if you can't explain it and you can't point to a universally understood example, you can't say, which, you know, maybe we're getting better there in pop-culture and I think, you know, that perhaps there are relationships on shows that we can point to that are a little-

Brian Earp

Increasingly.

Mary Alice Yeskey

Yeah.

Brian Earp

Fortunately, yeah, that's true, that's true, and that point an interesting role of TV and film and so forth and art in general to help us expand our imaginations to what's possible and to create mutually accessible exemplars that we can then point to as society would say, you know, it's kind of like that relationship from that movie.

Mary Alice Yeskey

Yeah, and that touchstone is just so valuable to somebody who doesn't have, you know, doesn't have the words. What are you currently working on research wise? Do you have any upcoming papers or books that you'd like to share with us?

Brian Earp

I have a whole bunch of different papers and books coming out. Okay, so, one book I'm working on right now is an edited volume on the philosophy of sex and sexuality with two of my wonderful colleagues. One is Claire Chambers, who's at the University of Cambridge and the other is Lori Watson who I think is at Washington University in St Louis, and so we're really enjoying bringing the tools of analytic philosophy to bear on stuff that really matters to a lot of us, including our romantic relationships but also, you know, what is, well to expand on our earlier theme, what is sexual orientation? That's another thing where like you mentioned with a gender binary, we have certain ideas. Well, you're either gay or you're straight or you're bisexual, those are the categories that are available and to which you can understand your own experiences, and so again if you try to explode those categories open a little bit and try to understand all the different ways our sexual disposition can manifest and feel to us and, you know, come out in different relationships, a lot of interesting questions are raised by that. So, that's one big project.

Another book that I'm supposed to be writing any day now is focused on the notion of a child's right to bodily integrity, and this is something that's complicated because in the case of adults it's defined through consent, so any infringement into my bodily sphere that I don't consent to is a violation of my right to bodily integrity. In the case of children, if they're very young, there's a sense which they can't consent to anything, but of course that doesn't mean that therefore

we have a blank slate to just, you know, intrude into their bodies in any way you like, and so when there's controversial practices that involve, you know, for example, a culturally motivated surgery or something like that, there's a sense in which the people who are doing it think it's a good thing, others might see it as a violation of the child's right to bodily integrity. But in the latter case they can't just appeal to consent, they can't just say well, the child didn't consent to it, because the first person will say, well, children can't consent to anything. So, that doesn't work as an argument. So, I'm trying to figure out, well, what is an argument that works? How can we decide what the moral limits are for the ways we interact with people who aren't in a position to consent to our bodily interferences?

Mary Alice Yeskey

That's really interesting, and very topical, you know, what with vaccines coming up, you know, I think some people would put that in that category. Some people wouldn't, but again, it's very gray, you know, you're putting something in somebody else's body and that's really interesting. And you said that that was a paper or a book?

Brian Earp

Well, it's a whole bunch of papers that I've been working on for a long time, but it's supposed to manifest as a book sometime in the next year or so.

Mary Alice Yeskey

That's right, you said that.

Brian Earp

I'll try to weave it all together to one coherent narrative.

Mary Alice Yeskey

I've been catching myself because for the longest time I've noticed, and maybe this is because I'm a parent, but when I see very very young babies with ears pierced. It always sort of strikes me, I'm just like, God, she's such a baby, why would you do that. And, you know, it is, it's a knee-jerk judgmental reaction on my part where I'm sure it's perfectly fine in that family but in my head, it was for me, it was something that I was bestowed upon when I was ten that, you know, I was given permission by my parents to do this. So, I don't know, it's fascinating.

Brian Earp

Right, and you could participate in the decision making, you could decide whether the risks of ear piercing were worth it to you. I mean, I think a lot of people think that ear piercing is so trivial that it doesn't rise to the level-

Mary Alice Yeskey

Doesn't count, as like circumcision.

Brian Earp

Yeah, circumcision might be more controversial because at least you recognize it's a surgery so you can sort of see why it would be a concern there. With ear piercing, some people say, oh, it's not enough. But I think people don't recognize that there's a pretty decent risk of infection, especially if the child is really young and they can't take care of it themselves. That's the whole thing, if you're a baby or whatever you rely on a caretaker to notice when something's wrong. The second issue is that you can have nerve damage, you can have scarring and keloid formation and so forth. So, it's actually a pretty risky thing to do and although I agree that it's not as severe as something like a circumcision, which I also argue against in my work, at least when it's not medically necessary, I've also raised arguments against ear piercing. I don't think that it's like, should be considered a criminal act or something like that, I just think there are moral reasons not to do it that many people don't tend to take seriously because they think of it as a trivial thing. But of course, many people think of circumcision as a trivial thing too, and I try to similarly say, well, it isn't that trivial, it's a genital surgery.

Mary Alice Yeskey

Right, irreversible.

Brian Earp

It's irreversible and it involves a private part of the body so we should at the very least, it should be on our moral radar as something to talk about, it's not something we should just take for granted.

Mary Alice Yeskey

And I'm thinking about the arguments too, in terms of, you know, if someone said giving a vaccine is the same, well it's not because you're preventing. Ear piercing doesn't prevent anything, but I know that there are people who would say it's all the same, just don't touch them in any way until they can say yes or no.

Brian Earp

The thing about a vaccine that I think is significant is it doesn't change the morphology of the body, you don't remove tissue, for example, and if that is what a vaccine required, so imagine that a vaccine, in order to get the vaccine you actually had to excise healthy, living, functional tissue or something like that. People would be like, well maybe we shouldn't do it actually, or at least the threshold for permissibility would be shifted dramatically. So, I think the fact that it's a sort of a diminutive intervention in terms of actually changing our physiology in a way that, like, you know, and again, vaccines also don't affect, like, private parts of our bodies in contentious ways and so forth. So, I think there's just, like, a lot of disanalogy between vaccines and other kinds of surgeries and even between ear piercing. But nevertheless, the ways in which it's

similar is people say it hurts, you're certainly intruding into the bodily sphere of the child. They may not fully understand why you're doing it or be prepared to agree to it or participate in it, and so, you know, we have to at least think through, what's the basis for permissibly putting a needle in somebody, and you know, I think vaccines are permissible, and so, you know, it's been a challenge for me in my course of doing this work to figure out what's a principled reason for saying why vaccines are okay but ear piercings may be questionable. It's an interesting line to try and draw but that's part of the fun in working on these studies, is you have to figure out how to get your moral inhibitions straight.

Mary Alice Yeskey

That's why you went into ethics (laughs).

Brian Earp

Yeah, yeah, yeah.

Mary Alice Yeskey

That's really interesting. Yeah, I'm just thinking about tattoos, and you know, all the ways that this road could go down. Interesting work. Well, I'm looking forward to reading your book, and thank you so much for taking the time to talk with us today, I really appreciate it.

Brian Earp

Yeah, it's my great pleasure, thanks for your questions.