AN AUTOBIOGRAPHY OR STORY
OF MY EXPERIMENTS WITH TRUTH

Mohandas Gandhi
Chapter 76: Faith On Its Trial

Though I had hired chambers in the fort and a house in Girgaum, God would not let me settle down. Scarcely had I moved into my new house when my second son Manilal, who had already been through an acute attack of smallpox some years back, had a severe attack of typhoid, combined with pneumonia and signs of delirium at night.

The doctor was called in. He said medicine would have little effect, but eggs and chicken broth might be given with profit.

Manilal was only ten years old. To consult his wishes was out of the question. Being his guardian I had to decide. The doctor was a very good Parsi. I told him that we were all vegetarians and that I could not possibly give either of the two things to my son. Would he therefore recommend something else?

'Your son’s life is in danger,' said the good doctor. 'We could give him milk diluted with water, but that will not give him enough nourishment. As you know, I am called in by many Hindu families, and they do not object to anything I prescribe. I think you will be well advised not to be so hard on your son.'

'What you say is quite right,' said I. 'As a doctor you could not do otherwise. But my responsibility is very great. If the boy had been grown up, I should certainly have tried to ascertain his wishes and respected them. But here I have to think and decide for him. To my mind it is only on such occasions, that a man’s faith is truly tested. Rightly or wrongly it is part of my religious conviction that man may not eat meat, eggs, and the like. There should be a limit even means of keeping ourselves alive. Even for itself we may not so certain things. Religion, as I understand it, does not permit me to use meat or eggs for me or mine even on occasions like this, and I must therefore take the risk that you say is likely. But I beg of you one thing. As I cannot avail myself of your treatment, I propose to try some hydropathic remedies which I happen to know. But I shall not know how to examine the boy’s pulse, chest, lungs, etc. If you will kindly look in from time to time to examine him and keep me informed of his condition, I shall be grateful to you.'
The good doctor appreciated my difficulty and agreed to my request. Though Manilal could not have made his choice, I told him what had passed between the doctor and myself and asked him his opinion.

‘Do try your hydropathic treatment,’ he said. ‘I will not have eggs or chicken broth.’ This made me glad, though I realized that, if I had given him either of these, he would have taken it.

I knew Kuhne’s treatment and had tried it too. I knew as well that fasting also could be tried with profit. So I began to give Manilal hip baths according to Kuhne, never keeping him in the tub for more than three minutes, and kept him on orange juice mixed with water for three days.

But the temperature persisted, going up to 104. At night he would be delirious. I began to get anxious. What would people say of me? What would my elder brother think of me? Could we not call in another doctor? Why not have an Ayurvedic physician? What right had the parents to inflict their fads on their children?

I was haunted by thoughts like these. Then a contrary current would start. God would surely be pleased to see that I was giving the same treatment to my son as I would give myself. I had faith in hydropathy, and little faith in allopathy. The doctors could not guarantee recovery. At best they could experiment. The tread of life was in the hands of God. Why not trust it to Him and in His name go on with what I thought was the right treatment?

My mind was torn between these conflicting thoughts. It was night. I was in Manilal’s bed lying by his side. I decided to give him a wet sheet pack. I got up, wetted a sheet, wrung the water out of it and wrapped it about Manilal, keeping only his head out and then covered him with two blankets. To the head I applied a wet towel. The whole body was burning like hot iron, and quite parched. There was absolutely no perspiration.

I was sorely tired. I left Manilal in the charge of his mother, and went out for a walk on Chaupati to refresh myself. It was about ten o’clock. Very few pedestrians were out. Plunged in deep thought, I scarcely looked at them, ‘My honour is in Thy keeping oh Lord, in this hour of trial,’ I repeated to myself. #Ramanama# was on my lips. After a short time I returned, my heart beating within my breast.

No sooner had I entered the room than Manilal said, ‘You have returned, Bapu?’

‘Yes, darling.’

‘Do please pull me out. I am burning.’

‘Are you perspiring, my boy?’
'I am simply soaked. Do please take me out.'

I felt his forehead. It was covered with beads of perspiration. The temperature was going down. I thanked God.

'Manilal, your fever is sure to go now. A little more perspiration and then I will take you out.'

'Pray, no. Do deliver me from this furnace. Wrap me some other time if you like.'

I just managed to keep him under the pack for a few minutes more by diverting him. The perspiration streamed down his forehead. I undid the pack and dried his body. Father and son fell asleep in the same bed.

And each slept like a log. Next morning Manilal had much less fever. He went on thus for forty days on diluted milk and fruit juices. I had no fear now. It was an obstinate type of fever, but it had been got under control.

Today Manilal is the healthiest of my boys. Who can say whether his recovery was due to God’s grace, or to hydropathy, or to careful dietary and nursing? Let everyone decide according to his own faith. For my part I was sure that God had saved my honour, and that belief remains unaltered to this day.
Gandhi’s decision problem: Moral convictions and decision making

In “An Autobiography or Story of My Experiments with Truth,” Mahatma Gandhi describes an extremely important decision concerning saving the life of his ten-year-old son. His choice concerned two alternatives: to take advantage of allopathy – recommended by scientific medicine, or to opt for hydropathy – a kind of alternative medicine. The crucial role in this decision is played by his religion and moral convictions. The focus of our attention is on two issues:

• how do moral convictions affect our decision making,
• how should a law be structured in the matter when the recommendation of scientific medicine is inconsistent with the strong moral convictions.

1. HOW DO MORAL CONVICTIONS AFFECT OUR DECISION MAKING?

Gandhi, in his “Autobiography,” explicitly states that the crucial role in his decision was played by his religion and moral convictions. Gandhi writes: “The doctor was called in. He said medicine would have little effect, but eggs and chicken broth might be given with profit. ... Religion, as I understand it, does not permit me to use meat or eggs for me or mine even on occasions like this, and I must therefore take the risk that you say is likely. (Gandhi, 279) Psychological research shows that when people hold strong convictions, their reasoning is not to gather valid arguments leading to the construction of a rational judgment, but rather to justify their intuitions. This is especially the case when it comes to moral convictions. Skitka and her colleagues (Skitka, L.J., Hanson, B.E., Morgan, S., and Wisneski, D.C; 2021), claim that moral convictions have certain distinctive features which set them apart from other, non-moral convictions. Indeed, Morgan & Skitka (2020) found that people who reported a higher degree of moral conviction on an issue (such as abortion, capital punishment, etc.), tended to perceive their position on the issue to be objectively true and
universally applicable. Research also shows that when someone sees a given issue as relevant to their personal sense of morality, then he/she feels obligated to act on them. No wonder that Gandhi’s strong moral conviction concerning hydropathy seems to be the decisive reason explaining his choice.

As shown by Skitka and her colleagues, such convictions have a number of important implications. For example, when people’s moral convictions are at stake, people tend to stick to their fundamental rules and are less inclined to succumb to peers or authorities. Research also shows that people are less likely to make compromises with those who do not share their point of view. As Gandhi put it: “The thread of life was in the hands of God. Why not trust it to Him and in His name go on with what I thought was the right treatment?” (Gandhi, 280)

Gandhi admits that he had faith in hydropathy and little faith in allopathy. As an argument against scientific medicine, Gandhi states that “The doctors could not guarantee recovery. At best, they could experiment.” (Gandhi, 280) This argument corresponds to what is known as the phenomenon of algorithm aversion, which was demonstrated in a seminal experiment by Dietvorst, Simmons, and Massey (2015). (See also Dzieżyk, Hetmańczuk, Traczyk, 2020.) These authors constructed a situation in which students could experience imperfect forecasts made either by an algorithm or by humans. Both the algorithmic and human forecasts were imperfect, i.e., they were accompanied by errors. Subsequently, they asked the participants whether they would prefer to make their own predictions or to rely on an algorithm. The students turned out to be inclined to rely on human advice to a greater extent than algorithmic advice, even though algorithms were more accurate than humans. In further research, it was found that aversion towards imperfect algorithms was present in different judgement areas such as medicine, business, etc.

The intriguing point in all these cases is the lack of comparison of choice alternatives for the same set of attributes. When Gandhi makes an argument against scientific medicine – “The doctors could not guarantee recovery” – he completely ignores the question of whether alternative medicine offers a greater or lesser chance of recovery than scientific medicine. (Gandhi, 280) Instead, Gandhi puts forward other arguments in favor of hydropathy – for example, that this is compatible with his religion (“God would surely be pleased to see that I was giving the same treatment to my son as I would give myself.” (Gandhi, 280)) In fact, the arguments put forward are varied, e.g., an argument against hydropathy – What would people say of me?” (Gandhi, 280) Similarly, in an experiment by Dietvorst et al. (2015), when students noticed that algorithmic forecasts made errors, their tendency to rely on algorithmic forecasts decreased; yet noticing that humans made errors did not result in decreased tendency to rely on human forecasts.
This line of argument seems to fit an approach that people are not looking for the overall values of the choice alternative, but rather attempting to come up with reasons for and against the alternatives considered. Shafir, Simonson, and Tversky (1993) refer to this approach as the reason-based choice theory. According to this theory, the decision maker seeks and constructs reasons to resolve inner conflict and justify a choice (to themselves and others) among alternative options. Moreover, the reasons for and against each option may have different weights dependent on whether we are thinking of choosing the alternative or rejecting it.

2. **How should a law be structured in the matter when the recommendation of scientific medicine is inconsistent with strong moral convictions?**

In this section we address the question, how should a law be structured in the matter when the recommendation of scientific medicine is inconsistent with the recommendations of religion or (more broadly) other strong moral convictions. The answer to this question depends upon how the legislative component of a society views the liability of an individual decision maker given the justification advanced for that individual’s decision. If we presume that the legislative component of the society reflects the views of the citizens, then the way in which the law in question should be structured depends upon the distribution of preferences among the citizens and the legislative system used for enacting laws.

For the purpose of addressing the question at hand for the Gandhi decision problem, we need to consider two basic groups of citizens. Group 1 individuals hold the view that religious justification overrides scientific justification. Group 1 individuals would prefer a law that does not hold the decision maker liable for any negative outcome resulting from a decision with a religious or moral justification. Gandhi, as per the brief story above, appears to fall into this group. Group 2 individuals hold the view that scientific justification overrides religious justification. Group 2 individuals would prefer a law that does hold the decision maker liable for any negative outcome resulting from a non-scientific justification. However, Group 2 individuals are likely to agree to a law that allows exemptions for religious or moral grounds. One reason why members of Group 2 would hold this view is the role of obligations stemming from individuals’ personal senses of morality, as shown by Morgan & Skitka (2020) and as discussed in Part 1. Thus, a member of Group 2 would reason, if I am to be free to carry out my obligations, then it must be the case that everyone is granted the freedom to carry out their obligations.
As noted above, the structuring of the law in question will depend upon the legislative system used for enacting laws. In a simple democratic system, the structuring of the law would depend upon the relative sizes of the three groups. In a representative, but not simple democratic, system, the law likely would be crafted to account for the views of the individuals in both groups. This would result in a law to the effect that a decision maker is held responsible for failed outcomes of non-scientific choices, with an exemption if the decision is based on religious or moral grounds. The open issue is the determination of religious exemptions that are acceptable under the law. The resolution of this issue rests with the legislative system and the legal system.

**REFERENCES**


