Just War and the Virtuous Physician: How Natural Law Evokes Character in Combat

by Andrew P. Schmitz

The intersection of military and medical ethics is ripe with potential for both good and evil. Both require grounding moral theory in real space and time that have effects on matters of life and death. The stakes are high for the military clinician, so their moral reasoning must be sound in order to perform virtuously *in bello*. However, can the military clinician truly serve two masters? How does an Army doctor serve both his medical profession and his patriotic profession? What ethic can best form a fully developed conscience that can hold these competing priorities together, often *in extremis*? This concept is called "dual-loyalty," defined as the "existence of simultaneous obligations which might come into conflict with each other."[1] Said differently, this means situations in which a clinician's professional obligations to the patient are in tension with obligations to another authority (e.g., commander, state, institution), such that fulfilling one obligation risks compromising the other. For military medical professionals, the conflict lies in the medical commitment to "do no harm" in the service of an organization whose role is to do harm on a great scale.

As a future educator of military clinicians, this author is concerned that current Army medical ethics doctrine does not fully leverage the tools at its disposal to help military doctors navigate dual-loyalty pressures and adequately uphold *jus in bello*. This term, translated as "justice in war," carries the idea central to this paper, namely that Soldiers, including military doctors, ought to behave ethically during combat. So Miller says as he prefaces his description of *jus in bello* principles of discrimination, proportionality, and military necessity: "we should be careful whom we kill and how much violence we use…"[2] This paper argues that contemporary Army medical ethics, while rightly attentive to deontological and utilitarian concerns, ignores virtue ethics grounded in natural law; that gap reduces the likelihood that military clinicians will behave justly in war under dual-loyalty tensions. This paper advances this argument in two movements. First, it will use the negative example of the Nazi doctors as evidence of how a mere rules-outcomes ethics fails to aid the military clinician in dual-loyalty scenarios. Second, this paper will demonstrate that natural law is the fertile ground from which virtuous medical ethics grows, making it the ideal framework for insulating against dual-loyalty errors and fulfilling *jus in bello* conditions.

Nazi Doctors

This paper uses the negative example of the Nazi doctors to illustrate the consequences of reducing a military medical ethic to only rules-outcomes considerations. Lifton's seminal work, *The Nazi Doctors*, tells the story of the physicians in the Wehrmacht, depicting chilling accounts of healthcare professionals who participated in the atrocities of the concentration camps, and how they were able to psychologically condition themselves to commit such evils.

The key to understanding how Nazi doctors came to do the work of Auschwitz is the psychological principle I call "doubling": the division of the self into two functioning wholes, so that a part-self acts as an entire self. An Auschwitz doctor could through doubling not only kill and contribute to killing but organize silently, on behalf of that evil project, an entire self-structure (or self process) encompassing virtually all aspects of his behavior.

At first blush, this is a jarring example of military medical ethics gone awry. How could such highly trained and intelligent medical practitioners commit such atrocities? The category of susceptibility that the Nazi doctors possessed compared to contemporary military clinicians differs not so much in kind as in degree. Said differently,

this author's students will face similar pressures to depart from both virtuous professionalism and a moral standard higher than the state's.

Lifton documents how the Nazi doctors followed their interests as the Third Reich defined them. The standards of care changed, so the physicians were following the new rules and roles created by the state. What was previously unconscionable was now broadly accepted: to use the instruments of medicine to exterminate patients rather than heal them. This shift in the deontological framework was made palatable by the utilitarian incentives offered by the state. Namely, by committing the atrocities in the concentration camps, the clinicians could help usher in the vision of a triumphant German people with Hitler as a deity-type leader.

For example, Sigmund Rascher conducted high-altitude and hypothermia experiments on concentration camp prisoners in order to use the research results to inform military aviation tactics.[3] Rascher, a German Schutzstaffel (SS) doctor, would immerse his study subjects—hundreds of prisoners that were sometimes clothed, sometimes naked— into frigid water that ranged in temperature from two to twelve degrees centigrade. He would then study the efficacy of various methods for warming the bodies to restore survivability. Rascher saw himself as fulfilling his duty as a medical researcher to improve military outcomes, particularly for the benefit of the Luftwaffe aviators operating over the cold waters of the North Sea. This demonstrates the dual-loyalty peril of relying solely on a rule-outcome ethic.

It is little wonder that the Nazi doctors had such a dismal *jus in bello* record. It is impossible to expect military clinicians to behave justly in large-scale combat operations without a virtue ethic grounded in natural law. For the sake of clarity, the definition of natural law that this paper works with is: "a moral order evident in nature, inscribed into the created order of the universe, accessible to the rightly formed intellect, binding upon all humanity across time and culture."[4] Without a careful subscription to an ethic that habituates moral excellence toward the teleological end of human flourishing, poor substitutions will take their place. As this paper will describe later, the following logic pattern is critical for avoiding dual-loyalty mistakes. Nature's God instantiates natural law in his creation, ordered to human flourishing, ingrained in the consciences of humans, who are accountable for their habituated character in war to the Supreme Judge of the world.

This paper argues that the Nazi doctors succumbed to dual-loyalty pressures because they exchanged Nature's God for Hitler as a simulacrum of deity, and therefore habituated vice instead of virtue, at the expense of human flourishing. Note how, absent a faith in Nature's God, Lifton describes how Hitler ascended in his place.

> Hitler became an agent of this transcendence, because of both his oratorical-demagogic genius and the German hunger for transcendence. As he invoked principles of "'honor,' 'fatherland,' '*Volk*,' 'loyalty,' and 'sacrifice,' … his German hearers not only took his words in deadly earnest but hung on them as upon the message of a savior." For each of these words represented a transcendent principle, a means of offering the self to an ultimate realm that provided a sense of immortality bordering on omnipotence. Then "the will of the Führer" could become a "cosmic law" because his message of revitalization could invoke the experience of transcendence and place that experience within a structure of thought and a program of action.[5]

This was the necessary condition for the Nazi doctors to perform their grisly duties with such religious fervor, because that is exactly what they were doing: performing theological worship:

> Here the killer claims for himself the ordeal of sacrifice. To perform the prescribed ritual slaughter, he offers both himself and his victims to the immortal Germanic people and its *hero-deity*, Adolf Hitler. . . . As the Auschwitz self enabled a Nazi doctor to go on selecting, with his assistants taking care of all the details and inmates keeping records of all that took place in the camp; as transports arrived and the crematoria smoked; as winter gave way to spring and spring to summer — if the Auschwitz self did not exactly feel that "*God is in His heaven,"* it at least experienced the security of being part of a larger, inexorable flow of human events. . . .[6]

These military clinicians, therefore, habituated their war crimes as they were swept up in these events, allowing

their consciences to be seared. The idea of habituation that virtue ethics carries, then, is not an option to be taken up or discarded. Instead, habituation will happen one way or another: either military clinicians will habituate virtue, or vice.

> As one gradually became habituated to Auschwitz, the Auschwitz self internalized its own requirements. Group support for the adaptation was always present, and life there became "like the weather," except more predictable: part nature, an enveloping reality. . . . The Auschwitz self did continuous psychological work to maintain that internal sense of numbed habituation in order to fend off potentially overwhelming images of its relationship to guilt, death, and murder. It could largely succeed, as Dr. B. told me, because dead bodies did not have to be viewed but "only smelled," and one got used to the smell.[7]

At bottom, the Nazi doctors sank to the lowest level of rules-outcomes ethics, enabled by a grandiose nationalistic narrative that allowed them to fail the dual-loyalty test miserably. Their examples serve as a warning for students of history: American military medical students ought to learn from the folly of the Nazi doctors so that they can avoid those same mistakes.

Natural Law and Virtuous Military Medical Ethics

This paper now turns to the second movement, where it will demonstrate that natural law is the fertile ground from which virtuous medical ethics grows, making it the ideal framework for insulating against dual-loyalty errors and fulfilling *jus in bello* conditions. As Charles connects: "What natural law reasoning yields in the just war ethic is the justice of doing good and avoiding evil, a determination that is anchored in right intention, and as a result refracted through proportionality and discrimination."[8] Said differently, natural law offers the necessary moral conditions for military clinicians to behave justly under dual-loyalty tensions.

Unfortunately, while the broader Army ethics literature supports incorporating natural law reasoning, Army medical ethics literature lacks this clarity. Army Doctrine Publication (ADP) 6–22 codifies the Army ethic and says, "The Army ethic has its origins in the philosophical heritage, theological and cultural traditions, and the historical legacy that frame our Nation."[9] Further, it cites the Declaration of Independence as part of the moral motivation for aspiring to uphold the Army ethic.

Foundations of the Army Ethic		
Applicable to:	***Legal Motivation of Compliance***	***Moral Motivation of Aspiration***
Army profession *Trust* *Honorable service* *Military expertise* *Stewardship* *Esprit de corps*	United States Constitution United States Code Uniform Code of Military Justice Executive Orders Treaties, Law of Land Warfare	Declaration of Independence Universal Declaration of Human Rights Just War Tradition (Jus ad Bellum) Army culture of trust Professional organizational climate
Trusted Army professionals *Honorable servants* *Army experts* *Stewards*	Oaths of Service Standards of conduct Directives and policies The Soldier's Rules Rules of engagement	Natural moral reason – Golden Rule Army Values Soldier's and Army Civilian Corps creeds Justice in War (Jus in Bello)
The *Army ethic*, our professional ethic, is the set of enduring moral principles, values, beliefs, and applicable laws embedded within the Army c*ulture of trust* that motivates and guides the Army profession and *trusted Army professionals* in conduct of the mission, performance of duty, and all aspects of life.		

Table 1. The framework for the Army ethic

This is central to this paper's discussion of the *jus in bello* behavior of military clinicians, with regard to the external source of morality in the American worldview. Of particular import, the Declaration of Independence notes (1) that there is a transcendent natural law, (2) that this law is authored by "Nature's God," (3) that this God, as Creator, has endowed all men with pre-political, unalienable rights, and (4) that the document concludes with a benedictory appeal to the "Supreme Judge of the world" and a "firm reliance on the protection of divine Providence." The Declaration's language reflects the historical reality that the Founders of this nation believed in a Supreme Judge who instantiates natural law that inherently dignifies the nation's citizenry. This external, transcendent source of morality, derived *extra nos* from a Divine moral lawgiver, is critical for understanding a distinctly American ethic. Clearly, the Army ethic supports natural-law reasoning, which is consistent with its focus on the virtuous character of the warfighter. The logic pattern described earlier in the paper bears repeating here. Nature's God instantiates natural law in his creation, ordered to human flourishing, ingrained in the consciences of humans, who are accountable for their habituated character in war to the Supreme Judge of the world.

ADP 6-22 goes on to implement this in the Army leadership requirements model, which bases its requirements on the character of the warfighter:

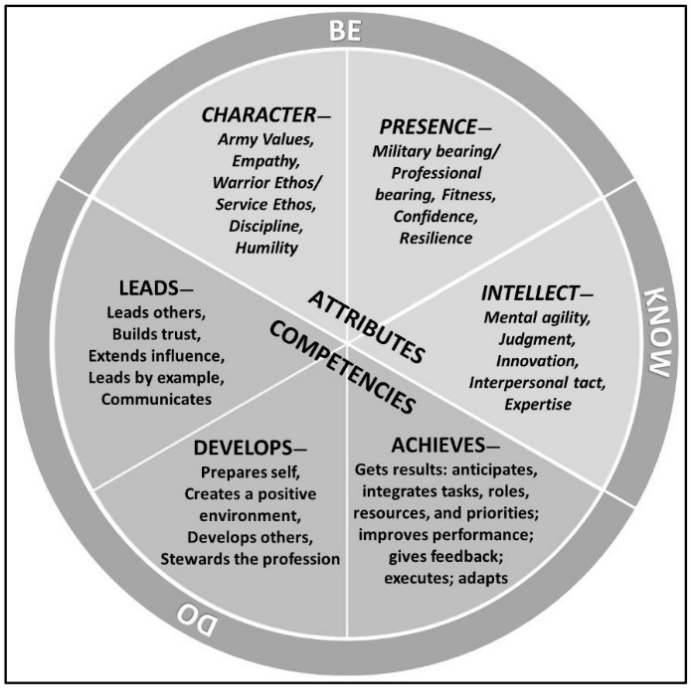

Figure 1. The Army leadership requirements model

Taken together, these solidify the military's emphasis on virtuous character formation in the founding doctrinal document for Army leadership. Further, in the Department of the Army Pamphlet on Moral Leadership, virtue ethics is perspicuously favored.

> The virtue perspective, which looks toward desirable character traits of the individual to understand what is ethical in the form of desirable virtues such as courage, justice, and benevolence, and how best to instill such virtues… Virtue ethics is a foundational ethical thought process often used in the military environment centering on core values such as competence, character, and commitment.[10]

As described, the Army's ethic is compatible with theistic moral reasoning. In fact, the Army embraces spiritual readiness as a component of *jus in bello* behavior. Army's doctrine on Holistic Health and Fitness describes a causal relationship between spirituality and the Army ethic when it says that the spiritual dimension of the warfighter's readiness enables the Soldier to "behave ethically" in combat.[11] Elshtain, when writing on just war,

substantiates this connection between natural law reasoning and morality ingrained on the heart when she said: "there is a naturalistic morality written on the hearts of God's sentient creatures."[12]

Indeed, acting against the conscience on which God ingrained a moral order was precisely what the Nazis were critiqued for in the Nuremberg Trials in 1945. United Kingdom's Chief Prosecutor, Sir Hartley Shawcross, at the International Military Tribunal, said in his opening remarks on December 4, 1945: "There comes a point where a man must refuse to answer to his leader if he is also to answer to his conscience."[13] In fact, he offered similarly clear thoughts in his closing remarks on July 26, 1946, when he, like the Declaration of Independence's appeal to a transcendental morality, made a key reference to the law of nature,

> There is no rule of international law which provides immunity for those who obey orders Which-whether legal or not in the country where they are issued-are manifestly contrary to the very *law of nature* from which international law has grown. If international law is to be applied at all, it must be superior to municipal law in this respect, that it must consider the legality of what is done by international and not by municipal tests. By every test of international law, of common conscience, of elementary humanity, these orders-if indeed it was in obedience to orders that these men acted-were illegal. Are they then to be excused?[14]

In summary, natural law provides the necessary moral order, and virtue ethics describes how that order is embodied in military clinicians, who are therefore oriented toward pursuing human flourishing and justice rightly, even under the extreme pressures of war.

Additionally, historical Army medical ethics literature incorporates virtue ethics as a core part of its curriculum. Edmund Pellegrino wrote the first chapter in *Military Medical Ethics* in 2003, titled "The Moral Foundations of the Patient-Physician Relationship: The Essence of Medical Ethics." As a matter of relevance, it has certainly stood the test of time.

> Essential to the notion of a virtue from its earliest definition in Plato and Aristotle is the idea of perfection (areté) in achieving a purpose. The virtuous physician or nurse is one who exhibits excellence in those character traits that enable one to come as close as possible to the healing purposes of the patient–physician (or patient–nurse) relationship. There are certain virtues or character traits that are particularly crucial; indeed, so crucial that they are entailed by the ends of medicine and without them those ends cannot be achieved.[15]

This definition is clearly valuable for several reasons, not the least of which is the understanding that medicine has a particular end, or purpose: healing. Any action of the physician that would not heal, but hurt, the patient, is inherently vicious, not virtuous, *à la* the Nazi doctors.

Pellegrino goes on to discuss and explain several virtues for the benefit of his military medical readers: fidelity, benevolence, effacement of self-interest, compassion and care, objectivity, courage, intellectual honesty, humility, and prudence. Pellegrino's account of the virtuous clinician provides the most fitting framework for articulating and cultivating the kind of character that dual-loyalty situations demand from military clinicians.

While the value of Pellegrino's work has stood the test of time, its utility has not. As a literature review demonstrates, virtue ethics is completely ignored in modern military medical literature. This is not only asynchronous with Pellegrino's work from 23 years ago, but it is also out of compliance with the Army ethic's emphasis on virtue and character development.

Indeed, the U.S. Army's modern medical ethics literature makes *no* explicit mention of virtue ethics at all. In fact, in the appendix of Army Techniques Publication (ATP) 4–02.2 dedicated explicitly to "Law of Land Warfare and Medical Ethics," the only ethical references are to laws surrounding the Geneva Convention.[16] Mention of the purpose of medicine, character, or virtue is completely absent. This author found nothing else of substance in the Army or joint doctrine regarding medical ethics.

Current Army doctor, Sam Doerle, agrees with this critique in his thesis when he says,

> The current medical ethics of military physicians is impaired through the reliance on two competing deontological strictures from the professions of soldiering and medicine–duties to the patient and duties to orders…The base knowledge of the providers in virtue ethics, both from the military and medicine, will be a benefit; however, the knowledge of virtue ethics will need to be transformed into a habituation of virtuous actions. Further complicating this is the tenet of this thesis' framework where each military physician ought to expect virtuous behavior from others. This could lead to a fear of needing to police colleagues regarding small actions. If it is not effectively taught and incorporated into the military physician culture, it may be relegated to academic study, as following the current conflicting deontological strictures seems easier than encouraging debate on actions which would allow one to lead a good life as a military physician.[17]

If one expects contemporary military clinicians to fare better morally *in bello* than the Nazi doctors of yore, then military medical ethics literature ought to place greater emphasis on the clinician's character. Carl Elliot emphasizes this need for honorable character for doctors when he said, "This is one reason why honor codes, such as they are, have traditionally been associated with institutions where surveillance is difficult or expensive, such as medicine and the military. We need soldiers who will act with courage even when no one is watching, and we need doctors who will act with respect and decency even in the privacy of an examining room."[18] Elliot rightly couples the need for virtuous character for both doctors and Soldiers alike. This honorable character is an indispensable component for the military clinician when they must choose between honoring their profession's commitment to "do no harm" or obeying unethical and immoral orders to betray the laws of nature and Nature's God.

Conclusion

The requirements for just war do not exempt physicians from satisfying the conditions for *jus in bello* behavior. In fact, of all people, the professionals who have taken the oath to "do no harm" are expected to behave the most ethically. Sadly, as this paper has shown, this has not always been the case. The Nazi doctors are a cautionary tale for contemporary military clinicians not to abandon virtue ethics grounded in robust natural law reasoning. As R.R. Reno avers: "Nature abhors a vacuum—especially human nature, which is sociable and restless."[19] Since humans will gravitate toward some higher cause and inevitably habituate some kind of behavior, military clinicians ought to choose allegiance to the correct higher cause and to habituate loving virtue instead of misanthropic vice. This author's future medical students ought to revive and expand the heritage that Edmund Pellegrino provided in the medical ethics literature, emphasizing the virtuous character of the military clinician. This, coupled with the proper moral-ecological relationship with deontology and utilitarianism, will prepare the military physician to succeed in navigating dual-loyalty tensions in large-scale combat operations.

Endnotes

1 Fritz Allhoff, ed., *Physicians at War: The Dual-Loyalties Challenge* (Dordrecht, Netherlands: Springer, 2010), 5.if any, of these ethical health issues apply to current Australian Defence Force (ADF

2 Paul D. Miller, *Ethics of War: A Short Companion*, Essentials in Christian Ethics (Brentwood, TN: B&H Academic, 2025), loc. 1618.

3 Robert L. Berger, "Nazi Science—The Dachau Hypothermia Experiments," *New England Journal of Medicine* 322, no. 20 (May 1990): 1435–40, https://doi.org/10.1056/NEJM199005173222006.

4 Miller, *Ethics of War: A Short Companion*, loc. 1029.

5 Lifton, *The Nazi Doctors*, 474.

6 Lifton, *The Nazi Doctors*, 435, 446. Emphasis mine.

7 Lifton, *The Nazi Doctors*, 445–46. Emphasis mine.

8 J. Daryl Charles, *The Idea and Importance of Natural Law: Fifty Questions and Answers* (Middletown, RI: Stone Tower Press, 2025), 154.

9 United States Department of the Army, *ADP 6–22: Army Leadership and the Profession* (Washington, DC: Headquarters, Department of the Army, 2019), 1–47.

10 U.S. Department of the Army, *DA Pamphlet 165-19: Moral Leadership* (Washington, DC: Headquarters, Department of the Army, 2020), 2–1, C-5.

11 United States Department of the Army, *FM 7–22: Holistic Health and Fitness* (Washington, DC: Headquarters, Department of the Army, 2020), 3–22, 10–14. Emphasis mine.

12 Jean Bethke Elshtain, "The Just War Tradition and Natural Law," *Fordham International Law Journal* 28, no. 3 (2005): 745.

13 Hartley Shawcross, "Opening Statement as Chief Prosecutor for the United Kingdom," in *Trial of the Major War Criminals before the International Military Tribunal, Nuremberg, 14 November 1945–1 October 1946* (Nuremberg, Germany: International Military Tribunal, 1947), 3:144.

14 Hartley Shawcross, "Closing Speech for the United Kingdom," in *Trial of the Major War Criminals Before the International Military Tribunal, Nuremberg, 14 November 1945–1 October 1946: Proceedings* (Nuremberg, Germany: International Military Tribunal, 1948), 19:465–66, https://avalon.law.yale.edu/imt/07-26-46.asp.

15 Edmund D. Pellegrino, "The Moral Foundations of the Patient–Physician Relationship: The Essence of Medical Ethics," in *Military Medical Ethics*, vol. 1, ed. Thomas E. Beam and Linette R. Sparacino, Textbooks of Military Medicine (Washington, DC: Borden Institute, Office of the Surgeon General, United States Army, 2003), 14.

16 United States Department of the Army, *ATP 4-02.4: Medical Platoon* (Washington, DC: Headquarters, Department of the Army, 2021).

17 Samuel Doerle, "Military Medical Ethics: Intersections of Virtue and Duty" (Master's thesis, Northeast Ohio Medical University, 2021), ii, 56.

18 Carl Elliott, *The Occasional Human Sacrifice: Medical Experimentation and the Price of Saying No* (New York: W. W. Norton, 2024), 52.

19 R. R. Reno, *Return of the Strong Gods: Nationalism, Populism, and the Future of the West* (Washington, DC: Gateway Editions, 2021), ix.