Can Thinking about Justice in Health Help us in Thinking about Justice in Education?

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ABSTRACT

In thinking about how a just state should assess and respond to inequalities in the distribution of particular goods, such as health and education, attention should be paid, first, to the causes of inequality with respect to these goods, and second, to the question of whether it is possible, and if possible, morally appropriate, to enact policy aiming to counteract these causes. I argue that similar kinds of causes lead to inequalities in health and in education, but that features specific to the area of education make it the case that there the case for state action aiming to achieve equality is if anything more stringent in the case of education than it is in the area of health.

Keywords: equality, justice, health, education, schools.

INTRODUCTION

Theories of distributive justice have traditionally labored at a fairly high level of abstraction. The canonical authors have thought not so much about the just distribution of this or that particular good within a specific institutional context. Rather, they have written about the background conditions against the backdrop of which the distribution of specific goods occurs (Rawls, 1971; Dworkin, 2000). While this is clearly an important prolegomenon to thinking about specific goods, it is not a substitute.

A very notable exception to this rule is in the area of health and health-care. Health theorists have for decades now been thinking both about how health itself has been construed for the purposes of generating a theory of distributive justice, about the resources that are relevant to distributive justice in health, and about the units of measurement that should be used to ascertain distributions in health outcomes (Daniels, 1985).

Political philosophers have, with some distinguished exceptions, been comparatively slow in taking up the task of constructing a theory of distributive justice in the area of education, or indeed in identifying a framework within which such a theory might be developed (Brighouse, 2000; Swift, 2003).

My intention in this paper is to bring some questions that arise in the context of the discussion of distributive justice in health to bear on the issues surrounding distributive justice in education. I will suggest that both in the area of health and in that of
education, theorists should first identify the various causes of inequality in the
distribution of the good that they are concerned with applying standards of justice to.
With respect to each of these goods, they should ask themselves whether it is compatible,
all things equal, with standards of social justice that inequalities result from these causes.
When causes of inequality have been identified that detract from a distribution’s justice,
political philosophers should then ask themselves whether it is in the state’s power to
counteract these causes, and whether it is appropriate for it to do so, given the other
normative considerations that must be taken into account in determining the bounds of
state action. I will argue that the conclusion that emerges from this kind of a comparison
will be that liberal democratic states have more reason to insist upon something close to
full equality of resources in the case of education than they do in the case of health-care.

I will begin with a brief sketch of the lines of debate that have been opened up in
the area of health by this way of identifying the main questions to which a theory of
distributive justice for health-care resources must provide an answer. I will then apply
the framework to the area of education, and of the just distribution of educational resources.
To anticipate, my conclusion will be that though there are profound ethical reasons for
liberal states committed to social justice to prevent certain causes from generating
differential health outcomes, these reasons are if anything even stronger in the case of
education.

**Justice and Inequalities in Health**

Under what conditions would we be able to say that inequalities in the distribution
of health states were just? Consider the multiplicity of factors that impact upon a person’s
health. First, there is an irreducible contribution of the set of genetic dispositions that an
individual has inherited. One need not be a genetic determinist to realize that one can get
dealt a more or less favorable set of cards at the outset.

Second, there are individual choices. Some people smoke, others exercise
religiously. Some overeat and drink to excess, others make healthy dietary choices. And
so on.

Third, a person’s access to health care will obviously have a considerable impact
on her health. Regular health consultations will contribute to the prevention of disease,
and access to pharmaceuticals, medical care and interventions will maximize the chances
that a person will be able to withstand the onslaught of disease when it inevitably occurs.

Fourth, there are “social determinants of health”. As public health professionals
have known for a long time, there are robust correlations between the distribution of (for
example) education, housing and other socio-economic factors and the distribution of
health states. Moreover, social determinants of health travel a wide range of causal
pathways. They can, for starters, impact health directly: economic inequalities will have
an impact on the ability that people have to provide themselves with resources that make
a difference to health: healthy food, gym memberships and the time to make use of them,
health insurance, and so on. Differences in access to educational resources will also make a difference to the knowledge base that people have, about a variety of things, and about their health in particular. Finally, there are robust correlations between socio-economic status and health-affecting behaviour. Poor people smoke more than the well-to-do, in part perhaps because of lack of information, but surely also because of robust class cultures that are very difficult to disturb.

There are, moreover, social determinants of health the exact causal pathways of which are not well understood. For example, the much-discussed finding that inequality is bad for the health even of those members of society that are at the top of the socio-economic ladder has as yet not been adequately interpreted (Daniels, Kennedy and Kawachi, 2000).

Once one realizes just how many kinds of factors impact upon health, the task of the theorist of distributive justice becomes complex. Which are the causes of health inequality the operation of which are compatible with justice, and which are not? Intuitively, one might in liberal, “luck-egalitarian” spirit think that the unequal distribution of health states is fair just in case they result from factors that are within the individual’s control (Wikler, 2005). Thus, very roughly, when inequalities in health states result from the informed and uncoerced choices, good and bad, that people make with respect to their health, they are fair. When, however, they result from aspects of people’s circumstances over which they can exercise no control, they are unfair (Arneson, 2004).

But matters are more complex than this plausible *prima facie* intuition suggests. This is because the choice/circumstance distinction cuts across the four categories of causes of health inequalities. We can’t simply say of one set of causes that they give rise to unjustified inequalities, whereas the others do not.

First, many of our choices actually involve quite a bit of unchosen circumstance. As we have already seen in alluding to the impact that (unchosen) socio-economic class has upon choices one makes to comport oneself in a more or less health-promoting way, and to the impact that unequal education levels have upon the knowledge-base that these choices proceed from, to the extent that good and bad health-related choices map onto existing socio-economic divides, it becomes quite plain that making people responsible for their choices would most likely end up cementing already existing socio-economic divides, and punishing those who are already most disadvantaged by social arrangements. Very roughly, poor people smoke more than rich people do, and they tend to make poorer nutritional choices. Though the causal pathways are not completely clear, what is clear is that we would be exacerbating injustice and inequality were we to simply assume that people are to be taken as morally responsible for all the health-related choices that they make, and thus as having to bear the costs associated with these choices. Though it is difficult to imagine how this might be applied in practice, we need at the level of theory to distinguish between choices that reflect people’s all-things considered values, and those that reflect their socio-economic circumstances (Roemer, 1998).
Different levels of access to health resources may moreover seem at first glance to fall squarely into the category of circumstantial, and thus unfair, causes of unequal health. But there may be situations in which this is not the case. For example, efficiency dictates that sparsely populated regions not be provided with their own full-service hospitals. When people choose to live in such areas, presumably in order to realize certain other benefits, residential patterns ensue that situate people differently with respect to health resources, but that are not *prima facie* unjust.

Thus, we must be careful before we categorize a whole set of causes of health inequality as chosen or unchosen.

A second complicating factor has to do with the fact that there may be reasons not to want the state to intervene to rectify distributions born of circumstances. There are, to begin with, determinants of inequality that the state cannot counteract. Though the development of genetic technology may lessen the extent to which this is the case, one’s genetic makeup is in important ways outside the reach of state action.

What’s more, there may be unchosen determinants of health inequality against which the state could, but ought not, to act. That is, in such cases, the unchosen character of these determinants only generates a *prima facie* case for state intervention, that is defeated by other normative considerations that weigh more heavily in deciding whether state action is appropriate. For example, were it to be demonstrated that aspects of the educational system impact upon health distributions, it would be a hasty inference to conclude that educational policy ought to be geared exclusively at the best health outcomes and at the most equitable distributions of health states. Merit, to name but one other normative criterion, ought not to be completely expunged from the determination of the distribution of certain educational resources.

To schematize somewhat, what complicates the issue of distributive justice in health is, first, that it is more difficult than meets the eye to draw a clear line between chosen and unchosen causal contributors to unequal health distributions, and second, that there are unchosen determinants of health upon which the state appropriately acts; others with respect it cannot act at all; and others again where considerations of health must be weighed against other ends that are properly served by the selfsame determinant.

Thus, we need to refine the intuition with which we began. The considerations adduced above suggest that health-care inequalities are just of they result from individuals’ uncoerced choices, unless these choices reflect an unjust background distribution of resources. What’s more, justice requires that in attending to the distribution of social determinants that impact upon the distribution of health states, liberal governments be sensitive to values other than health. There may be instances in which governments could equalize health states by acting upon the distribution of social determinants, but in which the need to realize other values would make it inappropriate for them to do so. This is clearly not as neat a basis for a theory as the rough intuition with which we began. But it fits more closely with the relevant moral considerations.
To make matters worse, I have been operating until now under a simplifying assumption that must at least be flagged here. It is that we have a clear idea of what “health” is. Surveying the theoretical literature, nothing could be further from the truth, however. Conceptions of health span the gamut from narrow bio-physical conceptions that emphasize longevity and morbidity, to the WHO’s conception, which claims that health should be taken to encompass all aspects of a person’s well-being, including psychological and social dimensions. Adopting a narrower or broader conception will obviously have an impact on the range of determinants that need to be considered by a theory of distributive justice (Weinstock, forthcoming). I will however not be addressing the issues which a broadening of our conception of health opens up in the context of this essay.

Justice and Inequalities in Education

What I want to suggest in this section is that it is worth thinking about distributive justice in education by deploying roughly the same categories as presently structure debates in the area of health. Short of coming up with a systematic theory of distributive justice in education, this way of proceeding might enable us to determine what range of factors should, and what range of factors should not, be allowed to determine patterns of educational inequality.

The upshot of this comparison will be that liberal states ought if anything to be more stringently egalitarian in the distribution of educational resources than in the case of health-care resources.

Thus, just as the distribution of health outcomes is determined by a wide range of factors, that go far beyond the operation of those institutions formally and explicitly charged with the delivery of education, namely schools and the educational system more broadly, so distributions of educational outcomes are determined by a similarly large range of factors.

First, there may, as in the case of health, be some irreducibly native aspect to a person’s “educational profile”. Though a healthy suspicion must be maintained about the tests that have been designed to measure intelligence, different individuals may, antecedently of the operation of any social or economic determinants, have different learning capacities. There may also, antecedently of the operation of socio-economic factors, be differing learning dispositions, different incommensurable sets of cognitive abilities that incline certain individuals toward certain educational contents rather than others. It will be important in what follows that we distinguish these two possibilities.

Second, people make different choices with respect to education. Some choose to devote a great deal of resources in the pursuit of education, while others have goals that lead them to invest resources elsewhere.
Third, and perhaps most obviously, the distribution of access to educational institutions and to educators will have a large impact on the distribution of educational outcomes. At the risk of belaboring the painfully obvious, access to high-quality educational institutions tailored to a child’s learning needs and dispositions will generate better outcomes than low quality, one-size-fits-all education.

Fourth, there are clearly social determinants of education just as there are social determinants of health. Socio-economic status, family situation, neighborhood, cultural membership all may have an impact on distribution of educational outcome. And just as in the case of health, the social determinants of education can act along a wide range of causal pathways, both direct and indirect. At one end of the spectrum, some children may receive educational advantages because their home is in and of itself a provider of education. Children whose parents help them with their homework, take them to museums, and in general provide them with a rich cultural environment contribute quite directly to their education in a manner complementary to the way in which schools do. Even where parents do not contribute directly, they may invest resources (in private schools, tutors, and so on) to procure educational advantages to their children. What’s more, decisions made by parents as to the proportion of financial resources to devote to their children’s education will reflect not just their financial capacity, but also the value that they ascribe to education as against other kinds of goods.

Social determinants may act indirectly as well. Different socio-economic contexts may not so much contribute or detract from a child’s education, but affect their ability to benefit from the education that is imparted elsewhere. At the most basic level, for example, it has been shown that differences in nutritional standards correlate with differences in ability to learn.

Having sketched the range of factors that contribute to inequalities in educational outcomes, we can now ask the same question we asked in the case of differential health outcomes: what would it take for a pattern of educational inequality to be considered just?

We may perhaps be tempted by the same basic intuition as we began with in the case of health: inequality in educational outcomes is just if it reflects freely undertaken choices, and does not reflect socially arbitrary factors.

However, this intuition runs into problems perhaps faster than the analogous intuition with respect to health did. In the case of health, there was at least a prima facie case to hold people morally responsible for their choices. Suspicions about this claim arose once the mapping of patterns of choice and of socio-economic divides became apparent. But there is no prima facie analogous plausibility in the case of education to the “responsibility for choice” thesis. This is in part because some education-relevant choices are made by children, and it is part of our understanding of what childhood is that the adults that children become should not be made to pay the price of decisions taken with immature faculties (Shapiro, 1999). It is also because other education-relevant decisions are made by parents for their children. And it is unclear why choices made by third
parties should have an impact on the distribution of health resources among the principal interested parties, namely children.

Let us begin with the first of these two claims. Clearly, many aspects of education law in developed countries can be seen as protecting children against the choices that they might make, were they left to their own devices. Kids might prefer not to go to school at all, yet we make them attend school until they are 16. They may prefer not to include math in their curriculum, but we make them study it, because we judge (rightly) that the decision not to do so would be one that children’s later selves would regret.

It is interesting that though we do not think that children should be allowed to make certain kinds of education-relevant decisions about their education because their later selves would thereby be harmed, we quite naturally allow other decisions that they make in the same area to affect their life-chances in ways that are quite often unalterable in later life. To wit, the decision to study hard and to apply oneself is rewarded with grades that determine whether a child will be able to enter elite educational institutions.

There is a puzzle here: why do we consider that certain decisions that children might make should simply be interdicted, presumably because we do not consider that children have the maturity to make these kinds of decisions (presumably because they cannot be expected to weigh the impact of such decisions on their future well-being), whereas others that call upon the same immature capacities are allowed to hold sway, even though they also affect future well-being?

Differences across children with respect to their school results can be explained in one of two ways. Either they reflect native ability, or they reflect factors that are not similarly “hard-wired”, for example a child’s preferences at the moment where she is deciding whether or not to apply herself, or the environment in which she grows up. If the weight of the former range of factors is predominant, then we must postpone discussion to a later point in the paper, when we consider whether inequalities generated by innate capacities ought to be counteracted by the state in some way. Similarly, we will be considering the attitude that a theory of educational justice ought to have toward “social determinants of education” later as well. To the extent that unequal results result from the decisions that children make to apply themselves or not, they should not be allowed to impact upon a child’s later life chances, for the same reasons that lead us to prohibiting children from not going to school. The upshot of this is that there are strong moral reasons to delay the point at which school results and tests determine access to elite educational institutions as much as possible. Clearly, the decisions made by a 16 year-old with respect to her education can be allowed to weigh more heavily than those she makes when she is 10.

What of decisions made by parents? Some parents devote considerable resources to their children’s education. They send their children to expensive private schools, hire private tutors, buy their children books and take them to museums, and choose to holiday in places that will open their children’s educational horizons. Others make different decisions, choosing to invest in flat-screen televisions rather than schools, to take their
kids to WWF matches on the weekends, and to holiday on the beach rather than introducing their children to the Uffizi.

In the discussion that follows, I will be focusing on choices that parents make to add private resources to those already provided by the state for the schooling of their children on the grounds that they will in this way be able to secure a better education for them. For reasons that will become apparent presently, other decisions taken by parents that concern, to put it in a rough and ready manner, what happens at home rather than at school, are appropriately taken out of the reach of the state, even though they generate inequalities.

Another puzzle looms here: people tend to believe that the educational inequalities that result from certain parents’ decisions to devote extra resources to their children’s education are morally innocent. Yet they also believe that children should be protected from parental choices that detract from their education. Parents cannot prevent children from attending school in order to exploit their labour. And programs that assist children with homework support to offset the effect of inadequate home environments enjoy wide support. We also tend to believe that there are limits on the degree to which parents can shelter their children from basic educational requirements in the name of their religious beliefs (Reich, 2005).

The puzzle is this: both types of parental decisions generate inequalities. Yet the former are not seen as posing a moral problem, whereas the latter are seen as calling for state action. The prima facie response to the statement of this puzzle is presumably to the effect that education-enhancing decisions harm no one while they benefit the children of parents making these decisions, whereas education-inhibiting decisions benefit no one and positively harm some children.

But this response fails to take into account the fact that education is at least in part a positional good (Hirsch, 1976; Brighouse, 2001: 121). This means that its value for an agent derives in part from his place in a distribution of the good, rather than from his absolute allotment. In other words, it matters that I have enough education, but above the threshold of sufficiency the value of additional increments stem not from how much more I have, but from how much more I have relative to others.

How is education a positional good? A full answer to this question would require a book rather than a section in a short paper. But let me point to two aspects of education’s “positionality” (Weinstock, 2007). First, schools do not only educate; they also socialize. And schools that cost more than others socialize children into a culture of privilege, independent of any educational merits they may have. Second, a direct correlate of this is that children are inducted into cohorts through private schools that will provide them with competitive advantage in later life. To put it crudely, forming bonds with the sons and daughters of CEOs means that one will be in a better position to get good jobs in later life than people even at equal levels of educational ability and achievement. Third, and again relatedly, attendance at elite schools that cost a lot of
money are often taken as proxies by elite institutions of higher learning and by employers of ability.

The fact that education is a positional good poses problems for philosophers who believe that educational justice is satisfied by a sufficientarian criterion (Satz, 2007). According to a sufficientarian, no issues of justice arise in the distribution of a good if everyone has *enough* of it. That some may have more benefits them without harming anyone, on this view.

If education is in part a positional good, then the sufficientarian response is inadequate (Reich and Koski, 2006). For inequalities even above some putative threshold of adequacy increase the value of education construed as a positional good. It is thus not true to say that the children of parents who either cannot or do not want to expend extra resources in their children’s education are not harmed by these decisions, for positionality implies that one person’s gain is another’s loss.

Educational inequalities generated by parental decisions regarding their children’s education thus pose a problem from the point of view of justice. Parents who use their resources to purchase private schooling for their children actually do harm other children by placing them at an unearned competitive disadvantage.

I can imagine two responses to this argument. The first would claim that its logical next step – the prohibition of parents’ ability to spend more money on their children’s education through private schools – is subject to the “leveling down” objection (Holtug, 2006). In general, egalitarians have been loathe to argue for egalitarian mechanisms that would bring the well-off down rather than the badly-off up. The reason for this reluctance is clear. If no identifiable benefit is generated for the badly-off by the reduction of the well-off’s bundle of goods, then it is a manifestation of what Rawls would have called “inexcusable envy” (Rawls, 1971). Would the prohibition on private schools be an instance of such inexcusable envy?

The second would claim that the investment of additional resources by parents on their children’s education is an instance of “legitimate parental partiality”. Parenthood is on this view all about *all about* doing things to benefit our children that we would not do for other children. For the state to get in the way parental partiality is unacceptably meddlesome, and what’s more, gets in the way of the realization of the goods that depend upon partiality within families (Brighouse and Swift, 2009).

We already have the elements in hand to answer the leveling down objection. The sufficientarian who believes that there is only loss when parents are prevented from using their discretionary resources to buy their kids schooling unavailable to children whose parents cannot or will not make the same decisions is faced with a dilemma. Either education provided in a public system truly is adequate to the purposes that education appropriately serves, in which case further increments acquired through the private system will produce rapidly diminishing marginal utility. The additional benefit it produces is in this case mostly due to private schooling’s status as a positional good, and
it is at best unclear that a liberal state concerned to promote social justice should view the decrease in the ability of the well-off to confer competitive advantage upon their children as an instance of leveling-down. Preventing parents from acquiring these additional increments will not be subject to the “leveling down” objection, as we would not be preventing them from getting anything of any great value. Or, additional education procured by parents really does generate extra utility according to a linear or roughly linear function, in which case it is open to question whether the standard of adequacy for all really is being met.

The second objection raises a more serious challenge. If it is the case that parental partiality is the condition for the realization of goods that could not be realized in any other way, then it could be the case that though educational choices make a difference to children’s life prospects, and though children experience the choices made by their parents as pure circumstances, other normative considerations properly exercise countervailing pressure, and force the conclusion that, at the very least, states must weigh the goods of partiality against those of educational equality before determining whether, and to what degree, they can limit the educational choices of parents.

But it does not follow from the fact that the state ought to abstain from actions that prevent the realization of the goods of partiality that it ought to allow all manifestations of such partiality. The private sphere already provides parents and their children with a wide range of opportunities within which to enjoy the goods of partiality. Though differences between households generate inequalities in later life, myriad liberal commitments converge to make the intervention of the state in this domain unthinkable. These include a concern with individual liberty, with the limitation of state power, and of course, with the goods of intimacy that partisans of parental partiality highlight. It is however an abuse of the notion of the “private sphere” to view schools as an extension thereof (Weinstock, 2009). Though we respect the religious choices that parents make for their children on the home front, we draw limits on the degree to which these decisions can be carried over into the educational sphere. Similar concerns with the at least partial autonomy of schools would seem to militate for egalitarian concerns being allowed to have more weight with respect to the organization of the school system than they do elsewhere.

The conclusion of this discussion is that educational inequalities generated by the choices of parents and of children are morally suspect, though inequalities generated by decisions made by parents on the home front must be tolerated in the name of the goods of partiality.

I have dwelled at great length on the first of the factors that tend to generate inequalities in education, to do with whether individuals ought to bear the costs (or reap the benefits) of their educational choices. I will be rather more succinct in my treatment of the three other range of factors.
First, how should a theory of educational justice deal with the fact (if it is a fact) that there are native differences between children that may translate into differences in educational achievement in later life?

A first observation is to recall that such native differences can in theory be of two kinds. Children may have greater and lesser in-built capacities for learning. But children can also have different kinds of abilities.

With respect to the former, a conclusion analogous to that reached in the case of health seems unavoidable. Though resources ought in the name of justice to be devoted to children with special educational needs (they did not choose to be born with these special needs, after all), there is no expectation that these differences will fail to generate significant inequalities.

With respect to the latter, however, a concern to avoid having brute luck generate inequalities should motivate us to ensure the educational system is not skewed toward certain educational profiles rather than others. A just public school system should be pluralistic: it ought through special programs and special schools to cater to statistically unrepresentative types of capacities. What’s more, it must be at pains not to confuse the former kind of native educational difference for the latter. That is, it ought not to be based upon the simplifying assumption that those whose ways of learning are different are ipso facto cognitively inferior.

Access to educational institutions clearly has an impact upon educational outcomes. Inequalities in access ought if anything to concern us to a greater degree than inequalities in access to health resources do. This is so for at least two reasons. First, the connection between health care and health is not as tight as is that between educational institutions and education. Health care narrowly understood – the services delivered by health care institutions and professionals – perform a role in the lives of individuals that is largely remedial. Though some preventive health is provided by such institutions (screenings, vaccinations, check-ups), the role of health care is, to put it crudely, to cure us when we are sick.

The role of educational institutions in the achievement of educational outcomes is much greater. Its role is constitutive rather than remedial. We learn at school, whereas we combat disease through our health-care institutions. Ignorance and disease are not analogous privative states. Health-care institutions restore us to a state that they are not primarily responsible for creating. Educational institutions contribute directly to the goal of education, rather than setting us back on a course that some negative state such as disease temporarily remove us from.

Concretely what this means is that we can imagine someone leading a healthy life without much contact with health-care institutions. No analogous prospects are available for people who are deprived of the resources that are provided by educational institutions. (The fact that some children are home-schooled does not constitute an exception to this rule: children who are home-schooled are provided with an institutional
framework different from that which formal educational institutions provide, rather than with none). The centrality of educational institutions to education implies that inequalities of access pose more of a problem of justice than does differential access to health care institutions (which is not to say that the latter does not constitute a very serious problem indeed).

This is all the more the case given that one of the factors that could justify differential access to health care resources fails to justify analogous differences in access to educational resources. When someone decides to forego the advantages of living nearby a modern hospital for the sake of a clam and peaceful life in the country, they are making a trade-off that they are perfectly entitled to make for themselves. (The question of whether they can make this kind of decision on behalf of their children is a vexed one, that cannot be addressed here) (Ross, 1998).

But when individuals make choices that affect their children’s access to educational resources, the same considerations that led us to want to protect children against the education-inhibiting choices of their parents are relevant. Children should not be made to suffer from the choices of their parents, over which they exercise no control.

Given what was said earlier about the importance of allowing for a sphere of parental partiality within which alone goods of intimacy can be pursued, the conclusion is not that a state concerned to realize educational justice should prevent families from living in places that lack quality educational institutions, but rather that they ought to ensure that such institutions are broadly available.

Finally, if educational institutions have a dominant role in determining educational outcomes and patterns of educational inequality, then it follows that what we might call “social determinants of education” play a correspondingly lesser role. But this is not to say that they play no role. We have already considered ways in which a theory of educational justice ought to view the myriad ways in which the most immediate social determinant, namely the family, and parents in particular, can affect educational outcomes. Though the state cannot and should not do much to offset the impact that the distribution of familial styles has upon the distribution of educational outcomes, there are many other social determinants upon which it has greater potential control. There are other aspects of a child’s everyday environment that can make a difference both to what he learns, and to his ability to learn. Public libraries, affordable access to museums and performing arts, science centres, affordable training in music and other art-forms, and the like are parts of the total intellectual context that will make a difference to a child’s education. When these are unequally distributed as between rich and poor neighborhoods, then educational outcomes risk being determined in part by unchosen social determinants upon which the state both can and ought to act.
Concluding Remarks

The very tentative conclusion that emerges from the foregoing considerations parallels that reached in the area of health: The unequal distribution of educational outcomes calls for action on the part of the state, except where inequality results from differences in native capacity (to the degree that these differences exist and that we possess reliable tools for measuring them), and from choices made in the private sphere by parents. The main differences between these two domains tend to militate for greater egalitarianism in the area of education than in the area of health. The sources of these differences have to do, first, with the fact that it is even less plausible to argue in the area of education that choice generates moral responsibility than it is to do so in the area of health, and second, because educational resources provided by educational institutions are more central to the achievement of educational states than are health resources in the area of health.

My suggestion therefore is that equality of educational resources is a requirement of liberal democratic justice. Now, it is important in understanding what this position does and does not imply that the issue of school funding be distinguished from the issue of curriculum design. What liberal justice requires is that differences in the amount of resources expended on the education of children never reflect the ability or willingness of parents to pay. Each child should therefore have the same amount of resources devoted to his or her education, unless differences were justified by differences in “native ability” (to the extent that such a notion could be spelled out in a satisfactory manner).

Arrangements that realized this principle would be compatible with a wide array of ways of organizing the organization of school curricula. One can imagine a multiplicity of providers, some public, others private vying for the equal resources that parents would have at their disposal to educate their children. There are normative considerations independent of those having to do with distributive justice to think that children would be better served by a plurality of providers overseen by a public educational authority than they would be, for example, by an outright state monopoly on curriculum design. I have however argued elsewhere that pluralism of this kind ought to be conditioned by the requirement that parents not be able simply to extend the dominance of a particular conception of the good that might appropriately obtain in their household into the school system (Weinstock, 1998).

But the important point for present purposes is that egalitarianism in the distribution of educational resources should not be equated with the requirement that all children be educated in exactly the same way. Equality of resources does not entail sameness at the level of curriculum.

A final note: I have been operating under a simplifying assumption analogous to the one that I quickly stated in the case of health. It is that we have a fairly stable conceptual fix on what education is. However, just as there are narrower and broader conceptions of health, so there are broader and narrower conceptions of what it means to be educated. Narrower conceptions might be limited to something like the “three Rs”,
while broader conceptions will encompass aspects of the full character development associated with concepts like Bildung and Paideia. The definition around which a theory of distributive justice in education is built will make a difference to the range of social determinants that one will have to bring into the purview of the theory. Raising this assumption happily lies beyond the fairly limited intent of this paper.

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**References**


**Biographical Note**

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