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VIEWS & REVIEWS

PERSONAL VIEW

Is it ethical to hire sherpas when climbing Mount Everest?

A medical ethical approach may be useful, but the jury's still out, writes **Emily Largent**

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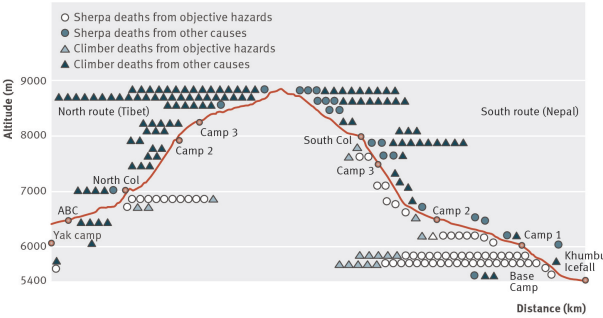
The Everest climbing season that has just ended was marred by the worst accident in the mountain's history. On 18 April 2014, 16 Nepalese sherpas died in an avalanche, and subsequent climbing expeditions were cancelled.[1 2] The deaths of men from poor communities, hired to perform dangerous tasks for the sake of mountain climbing, provoked controversy.[3]

I used data on deaths above base camps from the Himalayan database,[4] and definitions from a prior study.[5] The aggregate risk of death for sherpas during a climbing season was 0.8% between 1922 and 2013. Including the recent disaster, 73% of all sherpas' deaths resulted from objective hazards (avalanche, ice-fall collapse, crevasse fall, or falling rock or ice[5]) (figure and table⇓).



Distribution of deaths on the standard north and south routes on Everest

The question of whether it is acceptable to pay porters to assume risks for the benefit of others is an extreme variant of cases—common in medical ethics—where compensation and assumption of risk coincide. Consider debates about the sale of vital organs, paid gestational services, and material incentives for participation in clinical studies. Five concerns that routinely arise in these debates are those of adverse risk-benefit ratios, undue inducement, coercion, exploitation, and effects on potential safety measures. How sound are these concerns in the context of Everest?

Firstly, is the aggregate 0.8% risk of death in each climbing season "worth it" to the sherpas, given the benefits? A high altitude sherpa can earn up to US$5000 (£3000; €3700) a season; a porter at lower altitudes, where risks are greatest, earns substantially less.[6] This pay, even for high altitude guiding, would not justify assuming severe risks for most people in developed countries. However, compare it to Nepal's average annual salary of $700,[6 7] and consider how much risk many sherpas and their families would encounter by not climbing Everest—by remaining unemployed or accepting hazardous work elsewhere (for instance, many Nepalese have travelled to Qatar for dangerous work helping to build World Cup stadiums).[8] One remorseful climber worried, "My passion created an industry that fosters people dying."[9] Whether this worry is founded depends on how much being a porter elevates sherpas' net risk in life. If working on Everest leaves the net risks unchanged, for example, then indulging rich climbers' passion does not "foster people dying" any more than it prevents people from dying.

Undue inducement exists when the offer of payment makes decision processes less rational, and resulting decisions are not consistent with the agent's settled values and aims.[10] We lack evidence that payment to sherpas creates cognitive distortion. Money clearly induces impoverished guides, but perhaps not unduly so. If sherpas are fully informed about the consequences of their choices, in light of their limited alternatives, they may make a perfectly rational choice to work on Everest.

Coercion is usually thought to occur only when one person implicitly or explicitly threatens another with harm in order to obtain compliance.[11] Even if sherpas have no reasonable alternative except to work on Everest,[9] they have not been coerced because they have not been threatened with harm. The remorseful climber admitted to experiencing the "guilt of hiring somebody to work for me who really had no choice."[9] Although the mere offer of employment cannot—by definition—coerce, it is less clear if, in "no choice" situations, offers violate some other right to autonomy.[12]

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Exploitation occurs when one person takes unfair advantage of another's unfairly bad background conditions. By this definition, wealthy climbers are exploiting sherpa guides. However, this is mutually advantageous exploitation. The employment agreement makes both parties better off than they would be without it. Few Western expeditions would make it to the summit without a sherpa, and sherpas gain financially. Although wealthy climbers can shift risk to sherpa guides cheaply only because the sherpas lack decent employment alternatives, wealthy climbers are not personally the source of this background injustice. That is, they did not cause the income inequality, and it would be worse for many sherpas not to be thus exploited. It is an open and difficult moral question as to what, if anything, is the problem with mutually beneficial exploitation. So the correct policy response to this exploitation is not obvious.

The ethics of employing sherpas on Everest are complex. The solution that would be best for everyone is probably to make climbing Everest as safe as possible. Given the difficulty of predicting and avoiding objective hazards, however, it might be impossible in practice to improve safety greatly. Insofar as there is much demand to climb Everest and sherpas are essential to successful ascents, the sherpas could "exploit" this demand to claim higher wages and insurance payments than they currently do. Might increased compensation be perceived as a sufficient benefit to offset risk and therefore drive down investment in safety measures (a "crowding out" effect)? Perhaps. But higher insurance payments could also force Western guides and the Nepalese government to take risks to sherpas more seriously.[9]

It remains unclear whether it is ethical to hire Everest sherpas under existing conditions. However the close connection of the relevant considerations to mainstream medical ethics provides a framework for approaching this problem.

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Table

Table 1| Causes of death on Mount Everest, 1922-2013

	South side (Nepal)	North side (Tibet)	Total
Sherpas			
Objective hazards	36 (63%)	16 (80%)	52 (68%)
Other causes	21 (37%)	4 (20%)	25 (32%)
Combined	57	20	77
Climbers			
Objective hazards	17 (23%)	6 (7%)	23 (15%)
Other causes	58 (77%)	76 (93%)	134 (85%)
Combined	75	82	157
Total	132	102	234
Mortality rates			
Sherpas	0.9% (57/6182)	0.6% (20/3326)	0.8% (77/9508)
Climbers	1.2% (75/5841)	1.6 % (82 /5157)	1.4% (157/10998)
Combined	1.1% (132/12023)	1.2% (102/8438)	1.1% (234/20506)

Objective hazards include avalanche, ice-fall collapse, crevasse fall, and falling rock or ice. Other causes of death include falls, high altitude illness, sudden death, and hypothermia.[5]