PRESIDENTIAL ADDRESS: GLOBAL BIOETHICS — DREAM OR NIGHTMARE?

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INTRODUCTION

For many of us present at this opening of this fourth world congress of Bioethics here in Tokyo there may be a feeling of the fulfilment of a dream. This joint endeavour of the International Association of Bioethics and the Asian Bioethics Association is a powerful signal that Bioethics is not merely a Western philosophical pastime, but is a discipline that unites East and West, North and South in a common quest for solutions to the countless moral dilemmas of modern medicine and of the evolving biological sciences. To speak of a dream reminds us, perhaps, of the famous speech of Martin Luther King, in which he hoped for, prayed for, genuine racial reconciliation and the dawning of justice for the poor. Perhaps in this Congress, with participants and speakers from all corners of the globe, we will see how the richness of human cultures blends together in a common understanding of the obligations and the opportunities of human inventiveness and moral agency in health care.

Perhaps. But is ‘global bioethics’ necessarily the fulfilment of such a dream, or is it perhaps a nightmare, the promotion of a lowest common denominator, homogenised Bioethics? In his poem, *The Shield of Achilles*, the English poet, W.H.Auden, has retold the legend of the magic shield of Achilles, in which all the glories of ancient culture were revealed to the person gazing upon its surface. But the shield which Auden describes, in its picturing of the callous anonymity of modern societies, shatters the dream of richness and nobility and puts in its place a bleak scene of conformity and meaninglessness:

*The Shield of Achilles*

She looked over his shoulder   
For vines and olive trees
Is this the nightmare toward which we are heading as science and technology create ever more potent ways of environmental, economic and ultimately political control? We are rapidly coming to realise that control of much of our lives is no longer exercised by governments (whether democratically elected or not) but by the anonymous forces of global business. Our concern for a world wide ethic may well collude in such a handover of control. Solly Benatar, in a tough guest editorial in the Journal of Medical Ethics (Imperialism, research ethics and global health, JME 1998;24:221–222) has spoken of the ‘new imperialism’, which takes as its slogan a humanitarian concern for global health, but in reality makes sure that the most heavily funded medical research is of prime benefit to the rich, and of marginal benefit to the poor. Is ‘global bioethics’ in danger of becoming a kind of secular chaplain in this new imperial court, falsely assuring us that all is well because ethics is being given its due place in our appraisal of scientific advance? There is nothing like the seal of ethical approval to ensure an unimpeded advance of business — as one corporate leader expressed it, ‘good ethics is good business’.

Perhaps I exaggerate the danger, and overestimate the importance of Bioethics to the world of commerce. But it is certainly true that Bioethics rarely if ever constitutes a threat to biotechnological profits, thanks to its libertarian tendencies, and if perchance it does — as, for example, in the opposition of some
TOLERATION AND THE LIMITS OF DIVERSITY

But before we descend into such existential gloom about our field, we should consider how the whole enterprise began that led to this Fourth World Congress. The IAB was born out of the experience of its founding members (particularly of its first president, Peter Singer) of attempts to stifle free debate of ethical issues by banning speakers from meetings, or if these viewpoints were to be aired, by violently disrupting the meetings to prevent open debate. The Constitution of the International Association makes clear our shared commitment to oppose all kinds of censorship of ethical opinion. The fourth objective of the Association is ‘To uphold the value of free, open and reasoned discussion of issues in Bioethics’, and one of the ways this is to be implemented is by ‘providing support for scholars whose freedom to discuss questions of Bioethics has been restricted or is under threat’. In some countries these restrictions and threats are all too obvious, emerging as they do from an insistence on religious, social or political conformity: but the threats are also there in ostensibly liberal countries, as the murderous activities of the extreme anti-abortionist lobby have demonstrated yet again in the USA. In this context, the position of the IAB is unequivocal: We oppose all such dogmatisms. We welcome the whole range of ethical arguments and viewpoints. As an organisation we take no position on any of the substantive issues of debate in Bioethics. We have a single moral position, that to be genuinely ethical, discussion of any issue must be ‘free, open and reasoned’. Note, however, that this position does define limits to our toleration. We do not say that all ethics talk is of equal validity. We do not support fettered, closed or unreasoned
discussion. There are limits to the diversity that we tolerate, and these limits include not just opposition to censorship, but also to dogmatising, to propaganda, and to methods of persuasion that seek to bypass reason by whatever means.

But are we sure we have fully understood these limits? The rest of my lecture seeks to ask whether, unwittingly, we have overlooked the more subtle ways in which these limits can be transgressed in bioethics debate. I shall suggest that our true freedom consists in encouraging diversity and resisting all attempts at a single, overarching Bioethics.

THE TYRANNY OF RATIONALISM

I have entitled this section of my talk, somewhat tendently, ‘the tyranny of rationalism’. I think it is notable that, despite some remarkable initiatives in virtue ethics, feminist bioethics and in narrative ethics applied to health care, the bulk of bioethics literature is still predicated on the methodological assumptions of the rationalistic empiricist schools which have dominated Anglo-American philosophy. Certainly in some European countries there is fascinating work based on the more radical implications of post-structuralism for an understanding of health and health care, but little of it seems to find its way into the ‘mainstream’ English language bioethics journals. Even more seriously, we have seen little or nothing so far of non-Western world views in the Bioethics literature, whether this be insights gained from the very different approaches of eastern philosophy to questions of truth and logic, or whether it be from the perceptions of some indigenous cultures of the unity of humans with the non-human environment. I accept that some interesting counter-examples can be found — if we look hard enough — but my point is that we do have to search quite hard. Our idea of ‘free, open and reasoned’ has been shaped by a particularly western mode of reasoning, one which has been remarkably successful in enabling the emergence of an all-controlling technology, but is by no means the only way, or the even best way, of establishing our ethical signposts. It cannot be accidental that such a way of doing ethics fits neatly into the idea of constant economic progress as an end for humanity.

Thus I believe we have to look critically at our assumption that we know what is reasonable, open and free in ethics debate. Of course, there is no mistaking censorship and the imposition of dogma, but the subtler question is whether our idea of the ‘reasonable’ rests on impoverished assumptions about what
constitutes human agency. For example, we might equate the reasonable with acting out of self-interest, or with discarding as superstition any sense of the sacred in the environment or in that which makes us unique beings, including our own bodies. On this account of the ‘reasonable’, people who argue from different intuitions, such as that altruism is a central human capacity or that the body is more than a personal possession, are seen as breaking the rules of rational debate. But why are these intuitions discarded as not reasonable? Could it be because one (altruism) undermines the basis of economic theory, while the other (the realm of the sacred) impedes the progress of technology in subjecting all biological material to market control? We should at least be open to the possibility that some forms of liberalism and of utilitarianism, far from allowing neutrality and openness in ethical debate, impede the freedom of discussion by insisting on their unproven assumptions about reasonableness.

WHAT CAN WE HOPE FOR?

What then of ‘global bioethics’? The relatively short history of modern Bioethics has seen a remarkable expansion of its scope and complexity. From the seemingly simple beginning in a questioning of professionally dominated medical ethics, Bioethics has burgeoned into a multidisciplinary enterprise dealing with questions on the frontiers of modern science. Powerful theoretical approaches have emerged, not the least the structuring of debate in terms of general ethical principles, which will be the subject of later sessions in this Congress. It is also clear that utilitarianism in its numerous forms has provided a strong basis for both public debate and policy formation in many countries. I do not question the explanatory and heuristic power of these dominant approaches in modern Bioethics, but we are on perilous ground if we suppose that these ways of approaching the issues are all that is needed for a ‘global bioethics’. To be genuinely free, open and reasonable we must avoid the imperialism of systems which claim to be overarching, which try to tidy up the essential diversity of ethical intuitions in a set of categories devised by the disciples of a single method in Bioethics. I would like us to be listening more carefully for the divergent and minority voices in our field and to be asking for greater diversity in method of approach to the questions which vex us. Especially we need to rediscover the lost intuitions from cultures dismissed as ‘primitive’. These requirements make the
debate much more difficult, I accept, and instead of a rich diversity we could get merely a cultural mishmash, or a sentimental adulation of the past for its own sake. Often religion is offered as some kind of trump card, preventing further bioethical debate. All this is possible, but still I think we must be bolder in our ways of doing Bioethics together, if ‘global’ is to mean more than merely the domination of the world by one philosophical framework, whose moral achievements are at the best questionable.

I have already pointed out that the great virtue of the Constitution of the IAB is its emphasis on toleration of everything except intolerance, but we need a second virtue, that of humility about our own claims to rationality. Specifically I suggest that our work together in Bioethics teaching and research needs to pay more attention to the following issues:

We need a continuing debate on method in Bioethics, with a view to encouraging a variety of theoretical approaches. Bioethics has been from the outset a multidisciplinary subject area, but we have not come fully to terms with the tensions between social science approaches, legal approaches and philosophical approaches to the issues of Bioethics. Particularly challenging are studies which, by using qualitative methods, present us with a rich picture of patients’ perceptions and experiences of health care. How do we relate this work to the need to distinguish between descriptive and normative ethical studies? A different challenge comes from the re-emergence of virtue ethics in contemporary ethical debate. Is the search for the character of moral agents merely secondary to the attempt to establish general principles for action? I do not think so, but taking virtue ethics seriously as a separate way of doing bioethics commits us to complex cultural comparisons, and raises in an acute form the issue of relativity in ethics. These are important puzzles for a global bioethics, and I am arguing that the way to keep our subject open and free is not to try to resolve them prematurely, but instead to encourage a diversity of literature and research methods.

We need to extend further the social-political awareness of Bioethics, especially its relationship to justice and injustice in world wide issues of health care and health prospects. This was already powerfully advocated by my predecessor, Dan Wikler, in his Presidential address, and I strongly endorse it. Of course, neither he nor I propose that the IAB change its constitution and adopt a particular political stance. It is up to individual members to decide their own political allegiances. But what we must do is
to keep at the top of the agenda of Bioethics the social and political effects of developments in science and medicine. In addition we need to start an internal critique of the Bioethics literature to see what are the socio-political implications of the way we formulate and seek to solve issues in Bioethics. (The area of Genetics could be particularly fruitful for this kind of critique of the literature.)

Finally, as a theologian as well as a philosopher, my hope for Bioethics is that it will look more broadly for the grounding of ethical theory. I am certainly not advocating some kind of religious take-over of the discipline, far less a priority for the Judaeo-Christian tradition. Global Bioethics must respect the whole diversity of world views of ethics, both religious and non-religious. In the last analysis we do have to negotiate about ‘reasonableness’ of arguments to determine where our common language lies; and it is often true that when we enter the realm of religion we simply talk past each other. But I also suggest that we could too readily dismiss some religious insights as of little use to the field as a whole, because they depend on a faith element. In response I would say that faith of some kind (not necessarily religious) is a feature of all ethical commitment, and that we can learn from each other by listening to and respecting some ignored religious and cultural apperceptions of goodness.

I began this lecture with the words of an English poet — obviously to be true to my culture I must end with those of a Scottish one! They are taken from Edwin Muir’s poem entitled, One Foot in Eden, in which the ancient Hebrew theme of paradise lost is reworked by the poet to show how true moral goodness is found in the moral uncertainties of our lives. I think that Bioethics needs this kind of insight into the essential ambivalence of our human condition, in which we often seek false paradises, but may in the reality of painful human experience find hope East of Eden:

One Foot in Eden

(The poem uses the image of the corn field in which crop and weeds grow together — no chemical herbicides in this poem!)

Time’s handiworks by time are haunted,
And nothing now can separate
The corn and tares compactly grown.
The armorial weed in stillness bound
About the stalk; these are our own.
Yet still from Eden springs the root
As clean as on the starting day.
Time takes the foliage and the fruit
And burns the archetypal leaf
To shapes of terror and of grief
Scattered along the winter way.
But famished field and blackened tree
Bear flowers in Eden never known.
   Blossoms of grief and charity
Bloom in these darkened fields alone.

Edwin Muir

One Foot in Eden

In contrast with Auden’s bleak modern wilderness, we in Bioethics need to find together the ‘flowers’ never known in Eden.

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